

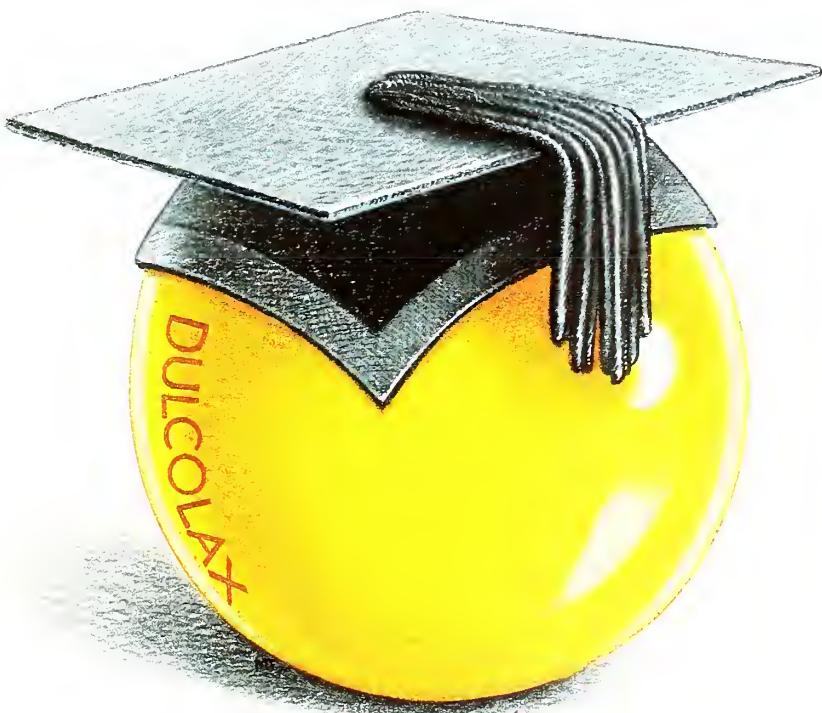
CHEMIST & DRUGGIST

the newsweekly for pharmacy

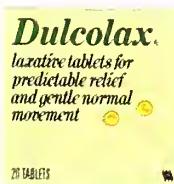
May 26, 1990

OVER THE COUNTER INSIDE

Dual site Dulcolax helps re-educate the bowel.



Like senna-based products, Dulcolax brings overnight relief from constipation. But while senna works on the colon alone, Dulcolax stimulates the rectum as well. This reinforces the rectal reflex or "call to stool", encouraging appropriate response. This dual site activity not only relieves constipation in the short term, but also helps the bowels to function more normally in the longer term. And remember, when you recommend Dulcolax, you should also recommend exercise, more fibre in the diet, and the answering of the call to stool.



DoH denies imposition of pay settlement

Hong Kong Capoten in UK

Council: Nathan, Baumber back in

Focus on Society's first ladies

The 75 years of Moss Chemists

Countercall call in the receivers

96 pc say 'yes' to Unichem conversion

Why would she choose our Cod Liver Oil?



It's perfectly natural.

Given the choice, people will always opt for a name they recognise and trust. And they certainly recognise SANATOGEN, because it's traditionally been backed by the largest promotional campaign in the total supplements market.

Quite simply it's more visible.

And they trust it too, because SANATOGEN has always offered quality and value for money.

SANATOGEN Originals Cod Liver Oil is a natural choice because its high quality oil is pure and natural, and it's also very easy to take. It comes in a cleverly designed, anti-drip, easy to pour bottle with an easy to open top and a free measuring cup. Even people who have difficulty with stiff or arthritic fingers can manage easily.

So when you're re-ordering Cod Liver Oil make sure it's one people recognise, both for its value for money and its pure and natural qualities.

Make sure you stock SANATOGEN Natural Cod Liver Oil, and give your customers the choice.



CHEMIST & DRUGGIST

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IN THIS ISSUE

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Pay settlement to be imposed in July, believes PSNC	904
Department of Health says no truth in the suggestion	
Hong Kong Capoten appears in UK without a licence	905
Pharmacists buying from reputable suppliers unwittingly break the law	
Two familiar faces back on RPSGB Council	905
Nathan and Baumber re-elected: Allen, Booth, Coleman, Lewis and Stone returned	
In the beginning there was Edgar Moss...	920
The 75 years of Moss Chemists	
Incontinence: signs, symptoms and treatment	923
A C&D/Kimberly Clark training seminar	
Quiet day at Lambeth for branch reps	930
Low turnout and unexciting debate...	
A woman's work...	934
The Royal Pharmaceutical Society's top two ladies	
Overwhelming 96pc support for Unichem conversion	936
Thorpe Park trade show a success for all	
Countercall bring in the receivers	940
Poor trading conditions after Christmas precipitate crisis	

REGULARS

Topical reflections	907
Counterpoints	908
Prescription specials	917
Letters	927
Times remembered	939
Business news	940
Classified advertisements	942
About people	946
Coming events	946

COMMENT

There was an air of inevitability over last week's decision by the Pharmaceutical Services Negotiating Committee to refer this year's pay award to arbitration. At the LPC conference, chairman David Sharpe made it clear that the Committee was not going to carry the can for what happened next without the endorsement of contractors. He was happy to steer the meeting towards giving PSNC a free hand, with the option of referring the whole matter to the Pharmacy Review Panel if a decent offer was not forthcoming from the Department of Health.

However, he may be a little premature in believing the Department will impose a settlement in July. The Department's official spokesman says there is no truth in this — no decision has yet been taken. This does have the ring of truth! However, don't think it won't happen. Unofficially the word this week is that it is "very likely".

There are two basic bones of contention between the PSNC and the Department. The first is whether the lump sum payment of £39m, agreed to wrap up the cost-plus contract, should be included in the figure used to calculate this year's rise (if it were, a 6.5 per cent increase, which is what is likely to be imposed, is half way acceptable). The

second is how the offer made to contractors is arrived at. PSNC argues that it should bear at least some relationship to the costs involved in providing the pharmaceutical service. The Department sees it differently. At the moment it pays a gross sum to buy a total service, for which it would claim to pay the "going rate". This system ensures an efficient service with contractors left to determine how they make ends meet. The alternative, from the Department's point of view, might be a net salary, paid after expenses.

There is a sense of dissatisfaction among contractors at the way the situation is developing. For the first time in a decade David Sharpe had a challenger in the recent PSNC election for chairman, and one contractor has recently used C&D's pages to seek support for a tougher line with the Department, and refusal to accept the abolition of the cost-plus method of remuneration. PSNC has a good track record in winning the cases it puts up to the Review Panel. Contractors need a satisfactory outcome to restore a sense of professional purpose and build on some of the new roles that are starting to be introduced, before they wither through lack of support.

Pay imposition on the cards, believes PSNC

Contractors in England and Wales are likely to have a pay settlement imposed on them by the Department of Health, says the Pharmaceutical Services Negotiating Committee. This comes in the wake of PSNC's decision to refer this year's offer to the Pharmacy Review Panel. The panel will not report back until October.

A Department of Health spokesman said on Tuesday that there was no truth in the suggestion — no decision had yet been taken on what to do next.

"We presume the Department will impose a settlement because otherwise there will be a large build-up of underpayments," said PSNC chairman David Sharpe this week.

"We believe that if there is to be a new fee structure it will be implemented from July 1, but will incorporate any underpayments from April 1. The discount scale is likely to be treated in the same way."

Exactly what the Department may impose remains unconfirmed, but Mr Sharpe felt it would probably be the offer put

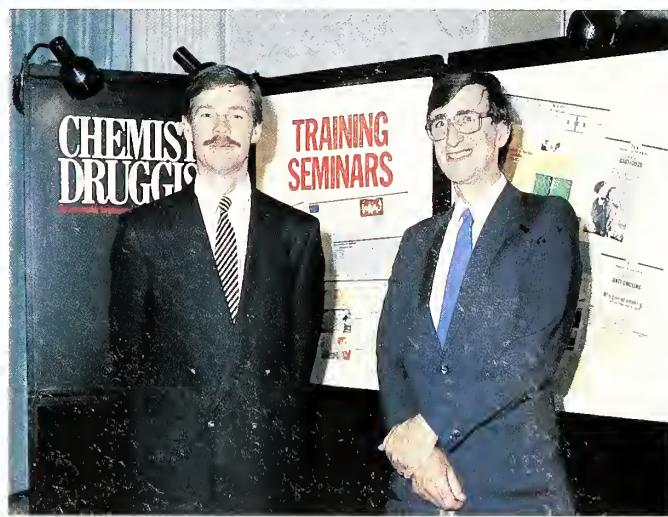
before the LPC conference in February. This represented an increase of 6.5 per cent on last year's figure (assuming a base of £500m — a figure which does not include the £39m of deferred payments which PSNC says should be included).

The final offer from the Department, following the

conference, was an increase from 6.5 per cent to 7.5 per cent, but at the same time the discount recovery was increased from 8.3 to 9.67 per cent, effectively cancelling out most of the gain. (Discount was negotiated down from 10.5 per cent to 9.8 per cent. The Department gave a further concession of £8.9m).

PSNC's summary of remuneration offer at May 14

Remuneration	Core £m	Non-core £m	Total £m
1989-90			
DoH base (A)	498.7	19.0	517.7
PSNC base (B)	498.7		
1988/89 lump sum	+39.0		
	537.7	19.0	556.7
1990-91			
PSNC claim	602.7	22.1	624.8
DoH offer	537.5	18.0	555.5
DoH offer increase on (A)	38.8	(1.0) 37.8 = 7.3 per cent	
	(B)	(1.0) (1.2) = (.2 per cent)	
Discount			
	Increase from 8.3 to 9.67 per cent		
NB Remuneration underpayment of £11.6m (provisional) at March 31, 1990 ignored.			(32.1)



Mark Rimmer, marketing executive at Kimberly-Clark, and Philip Gates, a continence nurse advisor, were the two speakers at the C&D seminar on incontinence in Hove earlier this month (see p923)

C&D/Kodak seminar

There are still places available for the free C&D/Kodak photographic training seminar next Thursday, May 31. The event is at the Spiders Web Hotel, Watford by-pass, Watford, Herts, at 6.30pm. Topics to be covered

include choosing the right film, good D&P, and taking better pictures. There will be a hot buffet meal. Pharmacists and assistants are welcome. To reserve places, phone Jan Powis on 0732 364422 by Tuesday noon.

PSNC wants pay and criteria ruling from Panel

The Pharmacy Review Panel is to be asked to look at the criteria used in fixing community pharmacist remuneration as well as this year's pay offer from the Department of Health.

The PSNC has asked the Panel to "consider the appropriate level of remuneration for contractors in 1990-91 in the light of the Secretary of State's final offer (including treatment of any underpayment arising in respect of 1989-90) and the criteria to be used in this and future determinations, and to make recommendations".

At no time has the Department given any indication how it arrived at its offer figure. PSNC suggests it is an arbitrary sum fixed by the Treasury without "logical reasoning". Mr Sharpe says PSNC is still unable to understand "recruitment, retention and motivation" as a basis for remuneration, as opposed to an abstract philosophy.

Counsel has advised PSNC to exhaust existing channels before considering any further legal action.

Crookes ban escalates

More pharmacists seem to be following the line of their colleagues in Liverpool and are removing Crookes products from display and actively recommending alternatives, in protest at the activities of parent company Boots in recruiting business from residential homes.

Crookes too have been busy, sending out much of the text of last week's statement (C&D, p853) as a letter to pharmacy customers throughout the UK.

C&D this week carries a letter (p927) from pharmacists in the 11-pharmacy strong chain Howard & Palmer of Swansea urging other independents and groups to follow the Liverpool example.

W.T. Arbon, general manager of the Eastbourne-based A. Proctor & Son has sent his own response to Crookes director of consumer products marketing Kevin Wilson, who signed the Crookes letter to customers.

Mr Arbon says that as far as

his group is concerned, Crookes may operate at a considerable distance from Boots, but that is merely a device to facilitate the "greater marketing glory" of the parent company.

"No, we do not accept that we should earn profits for your parent company which they can use to cause us further distress or annoyance," Mr Arbon says. His group no longer displays or recommends Crookes products.

Small rise in premises

The number of premises on the Royal Pharmaceutical Society's Register continues to show only small monthly changes. In the two months to the end of April, the overall number showed an increase of seven to 11,650 on the figure for the end of February.

In the two months, England (excluding London) was up four with nine additions and five deletions. Scotland was up three with four additions and one deletion, while Wales saw one deletion and London one addition.

Hong Kong Capoten appears in UK without a licence

Capoten tablets made in the UK and exported to Hong Kong for sale there have turned up in British pharmacies without the correct licence, claim manufacturers E.R. Squibb.

The company's sales director Glenn MacKinnon told C&D last week that the 12.5mg tablets are in packs identical to the UK product but they are round instead of the usual capsule-shape. The product has a Hong Kong batch number but no import licence so cannot be legally sold in the UK. The company has reported it to the Medicines Control Agency and the Royal Pharmaceutical Society.

The product packs are the same as the British packs and bear the UK product licence number. Head of regulatory affairs at Squibb, Keith Tomlins, told C&D that the product shape had changed in the UK in 1989. The batches involved are numbered 9K078, 9J202 (9K901), 9L174, OB126, OBO84, OB123 (OB194). According to the last list published by the Department of Health, no importer has a PL(PI) for Capoten 12.5mg.

The problem was spotted in a British pharmacy earlier this year by a Squibb sales representative. Apparently the pharmacist bought the product from what he thought was a reputable supplier.

NPA director Tim Astill wrote to the supplier who said they in turn had bought the product from what they believed to be a reputable supplier. They have now returned their "token consignment" of product to that supplier. However, Mr Astill is

not satisfied and told C&D he plans to write again asking what assurance the company can give that the same thing will not happen again, pointing out that the pharmacist had unwittingly broken the law and would not have been covered by his indemnity insurance. Mr Astill would also like to know if the supplier has contacted other pharmacists.

Gordon Appelbe, head of the Royal Pharmaceutical Society's law department told C&D that inspectors have been told about the problem. Pharmacists who have bought the product in good faith from a licensed wholesaler

will not be prosecuted and he would like them to notify the Society to help trace the source.

Squibb's Glenn MacKinnon told C&D that the Capoten had been sold to a Squibb subsidiary in Hong Kong. With a rapidly growing product it was difficult to assess local demand and supply just enough to satisfy the need, so stopping it coming back to the UK was difficult. Over-printing packs might help but would add to production costs. The product is sold in Hong Kong at around 30 per cent below the UK price because the colony is considered to be a Third World country.

Mr MacKinnon estimates that this year up to 1,000 packs a month have been coming back into Britain. Part of his concern is for the physical condition of the tablets re-entering the UK.

John Barker of Eurochem admits that his company had a consignment of what purported to be Capoten 12.5mg from a UK wholesaler. "Squibb then suggested this might not be UK Capoten and the consignment was withdrawn and returned to the UK wholesaler."

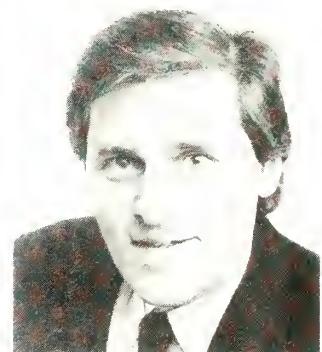
"We do not knowingly re-import any product produced for export" he said.

Two old faces back on Council

There are no new faces on the Royal Pharmaceutical Society's Council this year, but two former members are returning after a period of absence.

They are Alan Nathan, a Boots

teacher-practitioner at Chelsea department of pharmacy, who was a member of Council for 1986-89, and Noel Baumber, who works for Lincoln Co-operative Chemists and was last on Council



between 1975-78.

The five members retaining their seats are: David Allen, proprietor; Professor Geoffrey Booth, director, pharmacy practice research unit, University of Bradford; David Coleman, proprietor; Ann Lewis, district pharmaceutical officer, Chester and Halton health authorities; and Linda Stone, locum and currently the Society's vice-president.

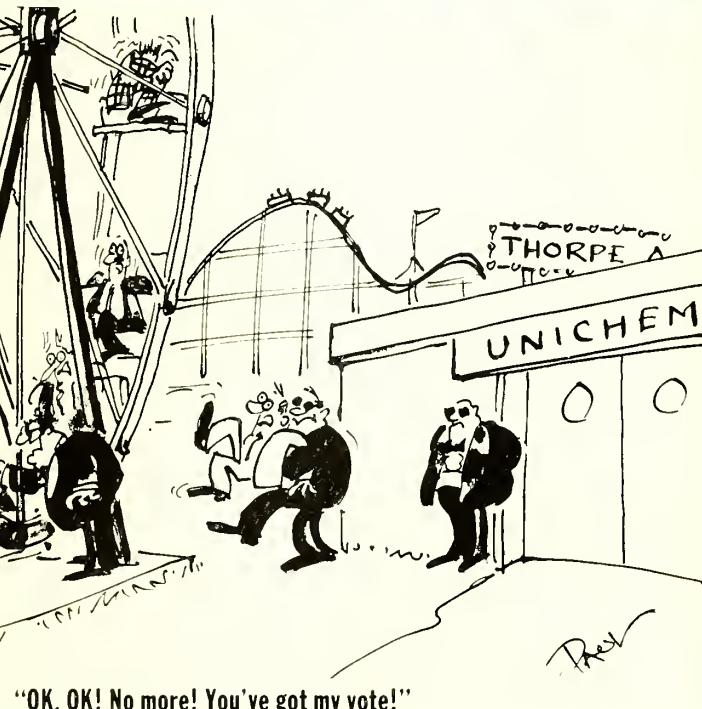
Alan Nathan told C&D he hoped to continue representing the views of "ordinary" pharmacists. "I want to try to resist becoming part of the establishment, although my previous experience is that this is very difficult because you have to co-operate to a certain extent," he said.

In particular, he believes that money on public relations is being spent the wrong way in that it is "poured down the throats" of politicians: "It would be better employed making the public aware of what pharmacists do and what they would miss if the service was reduced".

Noel Baumber told C&D he hoped Council had become much less formal than when he was last a member, because in those days many interesting new approaches were thwarted because members were too "stuffy". There was a lot of work to be done in planning a strategic approach and redefining pharmacy's role "because what we have to sell is very good."

The numbers of pharmacists voting continues to fall. Only 9,804 valid papers were returned out of a possible 37,437, representing a 26.18 per cent poll. Last year it was 27.6 per cent.

Auditors elected were Richard Clitherow, Sir John Hanbury, Mervyn Madge, Dr Brian Wills and Mrs Barbara Young.



PACT has an impact on scripts

The number of items prescribed by general practitioners is increasing far less rapidly than before, Professor Conrad Harris of Leeds University told a meeting of the Drug Utilisation Research Group, last week.

Two years ago, the increases in the number of drugs prescribed was around 3.5 per cent, but by 1989 it was only under 2 per cent. Mean costs per item on a monthly basis had fallen phenomenally and was lower than before PACT, said Professor Harris. Although he could not prove that PACT had brought about the changes it did appear to have some impact.

The system did have some limitations, however, with data compromised because of factors such as list size, discrepancies between the number of prescriptions written and numbers dispensed, and inadequacy of the weighting system for elderly people. "PACT paints well with a broad brush but it is drawing the fine lines that is becoming important and it has some limitations."

Although he had the "highest admiration" for the speed and efficiency with which the Prescription Pricing Authority has been able to generate information, Professor Harris warned of the dangers of over-interpreting PACT data.

In assessing relative risks, benefits and costs of drugs the "quality of life" of patients should more often be taken into account, said Dr Andrew Herxheimer of Charing Cross Hospital.

He cited the use of angiotensin converting enzyme (ACE) inhibitors in hypertension as an example. They are at present only licensed as second-line treatments in hypertension for doctors to give people who had not responded to other agents such as thiazides or beta-blockers, or when these were contraindicated.

Dr Herxheimer thought that the "quality of life hype" that has been prompted by the manufacturers has persuaded many doctors to ignore this advice. He predicted that ACE inhibitors would very soon be licensed as first-line therapy and he said that treatment policies were needed.

"Is it not time that the authorities took on board the responsibility of advising prescribers about relative risks and benefits in particular when licensing products?" he asked.

Council push standards and education

The Council of the Royal Pharmaceutical Society is to devote a "great deal of time" to the twin pillars supporting the unique role of the pharmacist — education and standards of both practice and premises.

President Marion Rawlings gave this message to the annual meeting last week, reminding members that the views of opinion formers were dictated by "what they experience when they seek professional services from a pharmacy". She said she had been delighted by the support all the organisations in community pharmacy had given the campaign she had launched in January to promote high standards of practice in community pharmacy.

And Mrs Rawlings said that Council would seek to implement "with urgency" the recommendations it had adopted on the continuing education of practising pharmacists. "The key one is that there should be a national curriculum for

pharmaceutical continuing education embracing a core syllabus and specialised syllabi for each major aspect of practice."

The president was delighted the profession had been successful in encouraging the introduction of an extended definition of NHS "pharmaceutical services" as an amendment to the NHS and Community Care Bill.

The pharmacy lobby had also been effective to date in countering the threat of Sir George Young's proposal to extend the scope of doctor dispensing through that Bill. The way for pharmacy to advance was to demonstrate that its interests coincide with the public interest.

The Society is to launch its 150th anniversary celebrations in 1991 with a reception at Lambeth on January 8, Mrs Rawlings said. There will be a banquet at the Guildhall in London on July 25 and the Society hopes to hold a garden party in the grounds of Lambeth Palace on June 8.

RPSGB adopts new advertising rules

Members at the annual meeting adopted without discussion or dissent that the guidance notes in paragraph 7 of the Code of Ethics, as adopted at the annual meeting in May 1984, be replaced by the following obligations:-

PUBLICITY

7. Publicity covers all forms of announcements or information relating to all the goods and services offered or provided by pharmacists or pharmacies to health care professionals or the general public.

7.1 All publicity

(a) must be of a character that could not reasonably be regarded as likely to bring the profession into disrepute.

(b) must be legal, decent and truthful.

(c) must not abuse the trust of customers or exploit their lack of knowledge.

7.2 Publicity for professional services, in addition to complying with the above conditions,

(a) must be factual, dignified and restrained

(b) must not disparage the professional services of other pharmacists or pharmacies, nor make claims of superiority, either expressed or implied, in this respect.

(c) must not involve an unsolicited approach by way of a telephone call, or a visit made without prior appointment.

(d) must not offer any inducement, by way of discount, gift, reward, dividend, rebate, or participation in a competition, in relation to professional services.

And be accompanied by such guidelines as may be agreed from time to time by the Council.

(The proposed guidance for current use was published in *Pharmaceutical Journal*, February 24, pp238-241).

CPP forced to leave London

The College of Pharmacy Practice is to move its headquarters out of London to the University of Warwick Science Park.

Announcing the move at the annual meeting of the College on Tuesday, chairman Alan Crabbe said the governors have been concerned about the cost of staying on at Bell House in Lambeth, which is rented from the Royal Pharmaceutical Society. Facing a rent increase of over 100 per cent for the next year, the governors had sought the opinion of members before coming to their decision.

Mr Crabbe said Warwick and the Midlands had been chosen because the area had the highest concentration of active College members and was good from the communication angle; but it may not be the permanent home.

Accepting the proposed rent increase — which C&D understands may well be much greater than 100 per cent figure given by Mr Crabbe — would have presented the College with further financial problems. Professor Peter Elworthy said the £60,000 operating deficit for 1989 was "rather worrying".

More asthma revealed

More than 250 people in Avon, Wiltshire and Gloucestershire have been advised to consult their GP following the National Asthma Campaign's drive to identify undiagnosed asthmatics.

During March and April, a team of specially trained nurses toured the West Country advising people with classic symptoms of asthma to consult their GP. More than one in five people were considered to be asthmatic and referred to their doctor. Some 32 per cent of these were children under the age of fifteen.

Pharmacists in the region have actively supported the scheme by displaying posters, distributing leaflets and paying special attention to customers seeking advice for night-time coughing, wheezing and chesty colds.

Asthma Check is funded by Allen & Hanburys.

The United Kingdom Clinical Pharmacy Association is now inviting entries for its 1990/91 ICI Clinical Pharmacy Practice Award. The £1,500 Award goes to support study overseas or within the UK. Ideas which explore practice within infection control, anaesthesia/critical care, cancer care or cardiovascular therapy, are eligible. The award winner will be invited to share their findings at the 1991 Residential Symposium in Blackpool. Further details are available from Mr M.J.S. Burden, 73 Aylestone Road, Leicester LE2 7LL.

The 1990 Lederle Pharmacy Scholarship Award offers £1,000 to a pharmacist to further their knowledge in cytotoxic pharmacy practice. Essays of not more than 1,000 words, entitled "Development of cytotoxic pharmacy practice", will be judged by Professor Pat D'Arcy, late of Queen's, Belfast, Mike Allwood of Derbyshire Royal Infirmary, and Paul Rayner of Lederle, on the basis of originality and coherent rationale. Closing date is June 18. Entry forms are available from Lederle's oncology reps or from Niki Caidan, Counsellor Public Relations. (Tel: 0494 711228).

AAH Pharmaceuticals' Link Pharmacy Systems have launched an advanced Interlink drug interaction and drug data compendium software program. It provides a vital extension to the Link 2+ in-pharmacy computer's patient medication records software — without the need for reprogramming existing patient records data, say AAH. It is based on generic drug names.

DF118 'widely misused'

Preparations of dihydrocodeine, particularly DF118, are widely misused, according to a report in last week's *British Medical Journal*.

A survey of 143 opiate addicts at a drug dependency treatment centre in central London showed that some 22 per cent were using DF118 for non-medical purposes. The researchers estimate that between 1,000 and 10,000 opiate addicts in the UK may be consuming DF118 on any given day. Subjects who took part in the survey confirmed that DF118 is widely misused and preferred to other dihydrocodeine preparations, say the researchers.

Pre-reg proposals disliked

The Society's proposals on pre-registration training may be in stark contrast to views held by the graduates themselves.

Graduates attending a one day conference organised by the Young Pharmacists Group at the Society's headquarters in Edinburgh rejected the concept of a pre-registration examination and a split pre-reg year, though they were in favour of regular training and assessment of tutors.

Mr Irvine, of the Joint Boots Pharmacists Association, said the JBPA opposed a written registration examination. Any exam to assess a pre-reg's ability should cover areas of professionalism and this would involve aspects which could not be written down.

Robert Millar, YPG chairman, said the proposals required the commitment of the Society if they were going to be implemented. And corporate interests had to be prepared to "make a sacrifice for the future of pharmacy".

The feeling of the meeting was that a competency-based training programme and a more structured appraisal system would avoid the need for an exam. While they did not like the idea of a 50:50 split year, it would be beneficial to gain some experience in a second field of pharmacy.

The LPC Conference in 1991 will be held at the Royal Pharmaceutical Society headquarters on February 18. It will be followed by the PSNC dinner at the Intercontinental Hotel, Hyde Park.

TOPICAL REFLECTIONS

by Xrayser

Injudicious reviews

Sawtry — enough is enough! The whole crazy saga of doctor dispensing is now so out of control that Parliament must intervene. Judicial review follows judicial review with every legal subterfuge being used by a predatory medical profession intent on holding on to its ill-gotten gains.

I had hoped an interesting advertisement in the *PJ* (May 12), from a dispensing doctor's practice in Essex advertising for a pharmacist, might give scope for a way out of this whole sordid mess, but those thoughts were to be dashed by the latest appeal of the Sawtry doctors to the courts.

Let us be very clear what dispensing doctors really want — in a word, money. Not content with an already well rewarded remuneration with no risk they also want the blood money from a sister profession's destruction. The British Medical Association has been noticeable by its silence. It appears to pay lip service to the Clothier agreements, while tacitly encouraging the dirty tricks of its maverick rural members.

Whatever the outcome of this latest appeal to the courts, pharmacy must now stand up and fight. It must take its rightful case to all MPs and stop this rape of our profession.

Tools for the job?

Where are all those marvellous changes from "POM" to "P" promised by politicians and industry alike to this eager community pharmacist? The other day a lady customer wanted a tube of Zovirax because, unlike all the alternative cold sore remedies I had to offer, it worked! Imidazole antifungals for vaginal treatment, chloromycetin eye ointment and anal indication for hydrocortisone also



come immediately to mind.

I wish to extend my advisory role into effective recommendation, and am impatient with the fine words but no deeds from those who advocate these changes.

Free market

So! Peter Dodd has emerged predictably victorious — or so my Unichem colleagues tell me. The sale of the century is now firmly on course and only time will reveal the consequences. An ailing co-operative, with fine ideals but commercial ineptitude has been turned, in a few years, into a premier force in wholesaling by the ruthless exploitation of its friendly society status.

It will be interesting to see what emerges when the protective cocoon of isolationism is broken and the free market allowed unfettered reign over Unichem's future. Pharmaceutical wholesaling will never be the same again and I fear that the stranglehold of large controlling companies can only be accelerated.

Full disclosure

Last week (May 19) in *C&D* there were 14 advertisements promoting OTC medicines to pharmacists for purchase and recommendation to the public. Of these *only one* presented full disclosure of active ingredient, six gave incomplete information and seven no declaration at all.

Although I accept that *C&D* is aimed at those who are theoretically aware of product contents, advertising text is often more akin to the telly soap-sud tradition than the professional Press. By all means sell products and promote them with trade inducements, but all these advertisements should contain clear product information, because ultimately it is the pharmacist who has the responsibility of recommendation.

COUNTERPOINTS

Baby Fresh gets a new travel case

Scott Ltd are relaunching Baby Fresh travel wipes in a new "pencil case" pack, to replace the old square shape. They claim it is the only refillable baby wipe travel pack on the market.

There are six z-fold wipes in each pack (£0.49); the z-folds enable mums to remove a wipe without having to use two hands, say Scott. The travel packs come in outers of 42, in groups of seven within self-merchandising units.

Support for the relaunch includes a £1 back consumer promotion, offered as 20p coupons off Baby Fresh 42s and 84s. A form on the back label of the travel packs is sent off for the coupons, which are dated for consecutive three week periods.

New travel packs will also be available via a continuous sampling exercise in Bounty new mother bags, which are given free to 85 per cent of new mums in hospital. And further support is planned with an up-weighted advertising campaign in mother and baby Press during August and September. *Scott Ltd. Tel: 0342 327191.*

Robinsons' rosy future

Colman's of Norwich are predicting good business for Robinsons baby drinks for 1990. The company plans to build on its current £17m share of the market during the next 12 months with an extensive television and Press campaign coupled with a direct mail programme.

Robinsons success in 1989 has been attributed to the introduction of fruit and herb flavoured granulated drinks, and the acquisition of Delrosa. The range of ready-to-drink baby juices also performed well last year, say *Colman's of Norwich. Tel: 0603 660166.*



A taste of home cooking for baby

Cow & Gate believe their new Olvarit babymeals, being launched next month, taste like home-prepared food.

The savoury dishes are designed to complement, rather than replace, the current Cow & Gate babymeals range. Initially, there will be six stage one varieties (which can be introduced from about three months) and eight stage two varieties (which can be used from about seven months). The jars are priced at £0.44 for 150g and £0.49 for 200g.

Cow & Gate and parent company Nutricia combined marketing expertise and technical know-how to create a new range of recipes with attributes missing in existing products.

Says Neil Watkins, senior product manager in charge of Olvarit: "Mothers trust current babymeal types, and appreciate the convenience they offer, but a significant number of those canvassed find them bland, and feel that they are too far removed from 'real' food as eaten by the rest of the family. Mums who have taken their babies on Continental holidays spoke of the greater variety and choice available in other European markets, such as France, Germany and the Netherlands."

Cow & Gate say the larger jar sizes and the more interesting recipes position the product as

appropriate for the main meal of the day. The stage two varieties are seen as the bridge to family meals, familiarising baby with the tastes and texture of "ordinary" food.

The recipes have a strong bias towards vegetables, using meat as a second or third ingredient, or eliminating it altogether. This reflects current nutritional opinion, and favours the introduction of "healthy" eating habits at an early age.

The launch will be supported by a regional television campaign in half the UK as well as advertising in the national parent care Press, baby annuals and health visitor journals.

Direct mail to mothers starts in July. Other support includes a national consumer promotion, sampling in the Bounty weaning pack, and free consumer and health visitor literature. *Cow & Gate Ltd. Tel: 0225 768381.*

Hawaiian Tropic have set up a special freephone order line for their products for the Summer. Operators will take orders at a special discount and ensure that pharmacists receive the stock within 24 hours, says the company. Dial 100 and ask for Freephone Healthcare Hotline, say *Hawaiian Tropic. Warner-Lambert Health Care. Tel: 0703 620500.*

Cash prizes in Abidec draw

Pharmacists who display Abidec multivitamin drops in their baby care section during June and July will be automatically entered into a free prize draw. Warner-Lambert are offering prizes of £100 in each of their 28 sales regions.

This national campaign is to prompt pharmacists to respond to consumer demand by stocking Abidec drops in the baby section, says the company.

A survey by Warner-Lambert has found that the majority of mothers expect to find vitamins among other baby products in the pharmacy. *Warner-Lambert Health Care. Tel: 0703 629816.*

Babycare offer from Vantage

An "extra fill" promotion on Vantage babycare products, which runs until June 29, offers benefits to both members and customers, say AAH Pharmaceuticals.

Customers will benefit from the 20 per cent extra packs on five products: baby bathcare, baby lotion, baby oil, baby shampoo, and cotton buds (180s).

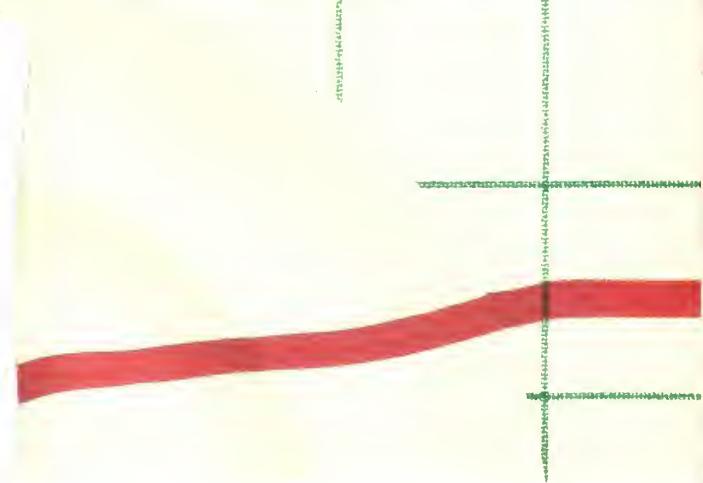
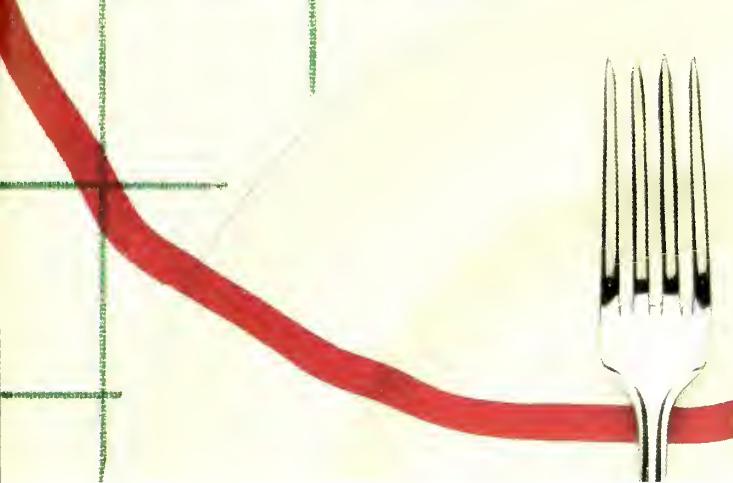
Vantage members who order more than five cases of the promotional lines will receive an outer of Vantage polycarbonate feeding bottles free (worth £5.52 at rsp).

On orders of ten or more cases, members will receive a free outer of the Vantage feeding bottles plus one free outer of Vantage children's foam bath (worth £12 at rsp).

Purchases of outers of the promotional lines will also count towards own label retrospective discount, say AAH Pharmaceuticals Ltd. Tel: 0928 717070.

New research study results

How chewing gum rapidly curtails two hour plaque acid attack



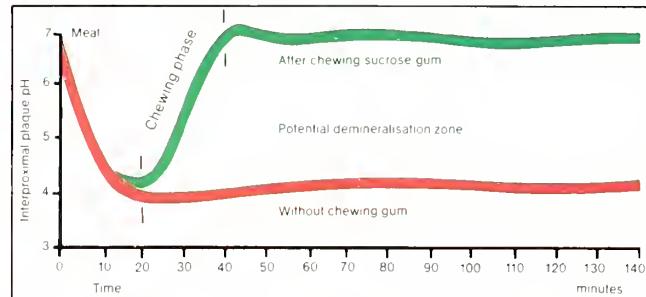
Most meals and snacks increase plaque acid production.^{1,2} Research shows that this acid threat may be prolonged and the new study demonstrates that two hours or more can elapse before acid in the interproximal sites is neutralised.³ And with five or six snacks a day being quite common, many patients' teeth may be at risk for long periods of the day.

The chewing of gum after eating triples salivary flow⁴ and delivers saliva throughout the mouth, reaching even interproximal sites where carbohydrates may be trapped.¹ As a result, acid is neutralised quickly and plaque pH is returned to, and maintained, at resting levels. There is wide acceptance of this benefit from Orbit sugar-free gum where restoration of plaque pH to resting levels is known to be rapid. Consequently, attention is now focusing on whether gums containing sucrose exert a similar benefit.

The new study using Doublemint chewing gum after meals shows that once the sucrose is chewed out (generally within minutes)⁴, the gum behaves in much the same way as sugar-

free gum, with acid neutralisation being completed within a 20 minute chew period.³

Interproximal plaque pH response to typical nutritionally balanced meal with and without sucrose chewing gum.³



Since most people chew a piece of gum for at least 20 minutes these early results suggest that whichever gum your patients elect to chew after eating, plaque acid can be neutralised much faster than by not chewing.

The new research data provides further support as to why the chewing of gum for 20 minutes after eating should be considered a valuable adjunct in maintaining good dental health.

 **WRIGLEY**
DENTAL PROGRAMMES

Baby foods forecast

Pharmacies lead by volume in all sectors of the babyfoods market, according to Cow & Gate's '1989-90 Babyfoods Market Review and Outlook.'

Babymeal sales are back to 80 per cent of the volume they were before last year's contamination crisis and total recovery is expected by December. Grocery sector sales were hit harder than pharmacies', partly because some grocery retailers reacted by removing products from the shelves and partly because mothers sought the reassurance of the pharmacy's "white coat environment". The pharmacy share of babymeals increased from 53 per cent in 1988 to 59 per cent of sales in 1989.

Initially the wet meals market collapsed to about half the pre-crisis volume, but the overall 1989 volume (195 million units) fell by only 19 per cent compared with 1988. Dry meals benefitted a little at the time of the crisis but the gains have not been sustained, says the report. Volume sales of cans only started to increase at the end of the year, mainly due to aggressive support.

The total babyfood market grew last year by 5 per cent to reach £201m at rsp. Cow & Gate were overall brand leaders with sales of £58m compared with Wyeth's £40m.

In spite of adverse publicity on general food issues, the babymilks market survived relatively unscathed and showed continued, although reduced, growth of 2 per cent volume and 14 per cent value bringing the total market to £91m. Soya milk formulas were affected badly by the aluminium scare and sales reduced by 40 per cent.

The pharmacy sector still dominates with 38 per cent of volume sales, compared with 28 per cent in grocers and 30 per cent in clinics. The market is expected to increase by at least 12 per cent in value and 5 per cent in volume in 1990-91.

The rusk market stabilised at £13m, the same as 1988. Pharmacies have traditionally sold more than grocers whose 47 per cent share is growing slowly.

The report says that babydrinks are undoubtedly the most active sector of the babyfeeding market and have grown in value from £15.4m in 1987 to £20m last year. The pure juice sector dominates with a 76 per cent share. Pharmacies and drugstores continue to account for two-thirds of babydrinks volume, although the grocery sector is making gradual inroads. Cow & Gate Ltd. Tel: 0225 768381.



One step at a time for Alberto

One Step, a shampoo and conditioner in one, is the latest product from Alberto-Culver, available in three variants.

Alberto claim that One Step is the first all-in-one shampoo and conditioner specially formulated with different levels of conditioner to suit individual consumer needs. The three levels include light for frequent use: super for extra body and deep for dry and treated hair.

One Step comes in 200ml (£1.55) blue and aqua green bottles which are recyclable to "satisfy environmental concerns." One Step is also biodegradable.

The launch is scheduled for July and Alberto will be supporting it with a £5.1m television advertising campaign, consumer trial in 5.1 million homes and an "intensive" PR and promotion programme. A full range of POS material including showcards, shelf edgers and shelf wobblers will also be available.

The company has also relaunched its VO5 shampoo and conditioner range with new formulations and "distinctive", recyclable packaging.

The range has been renamed VO5 Plus with moisturising benefits for all hair types.

Four shampoos are included: frequent use; extra body; permed/dry/damaged/colour; and normal to greasy. Three VO5 conditioners will be launched: extra body; normal to dry; and permed/coloured damaged.

The range will be packaged in modern bottles offering shelf efficiency and impact at POS say Alberto. The shampoo comes in 300ml (£1.15) and the conditioner in 250ml (£1.15).

The relaunch will be supported by a £5m television campaign beginning in September and full POS material will be available. Alberto-Culver Co. Tel: 0256 57222.

Get your Hands Dry and Sweet Talk

Chancellor are offering pharmacists who purchase one outer each of Sweet Talk and Hands Dry the chance to win a Sharp voice-activated video recorder.

Sweet Talk is an aerosol breath freshener, which is said to neutralise mouth odours as well as leaving the palate with a fresh mint sensation.

It comes in a gold and black "sophisticated" container, and outers of 24 are available in "eye catching" counter units.

The anti-perspirant Hands Dry, is available in a special promotion pack of 30ml (£1.95); a 60ml pack (£3.50) will be available from July. The product, which is

being targeted at sports people, will be advertised in the national Press and sports magazines. Consumer promotions and a direct mail campaign are also planned.

Chancellor, who now distribute both of these products, are giving away a blank video tape to retailers who order one outer of each.

In addition, their name will be entered in a free draw for the Sharp video recorder. Both the offer and competition run until June, and also includes a special stocking bonus of 13 for the price of 4 or 12 on both lines. Distributor Chancellor Group Ltd. Tel: 0978 61351.

Breeze is for scrunching

Philips have introduced Breeze, (£14.95) a new "soft" hairdryer said to be ideal for scruch drying naturally curly or permed hair.

Breeze is a diffuser dryer described as compact enough to fit "comfortably" into the hand. It is also suitable for children's hair, say Philips, because it is light to hold and gentle on the hair. It also features an automatic cut out.

The dryer has pastel blue and grey graphics and a large hanging hoop for easy storage. Philips Home Appliances Ltd. Tel: 081-689 2166.



Scrumptious Scrunchies

"Washed neon" Crinkle Crush Scrunchies are the latest hair fashion accessory to be launched into the Lady Jayne range.

They are available in four faded neon tones of green, orange, pink and yellow, and are said to be ideal for Summer.

A "sell faster display arm" has been developed, branded with the Lady Jayne logo, which holds up to 20 of the Scrunchies (each £1.75). Laughton & Sons Ltd. Tel: 021-474 5201.

Nurdin & Peacock's latest Superdeal promotion will run from May 29 until June 15. Special offers include six 250ml packs of VO5 shampoo for the price of five, 12 packs of Aspro Clear can be purchased for the price of ten. An outer of 12 18s costs £5.99 and gives 46.8 per cent profit on return. Nurdin & Peacock plc. Tel: 081-946 9111.

ROBINSON SOFTER BREAST PADS

FOR A MORE COMFORTABLE PROFIT

NURSING BREAST PADS

SOFT, ABSORBENT AND
A BETTER SQUARE DEAL

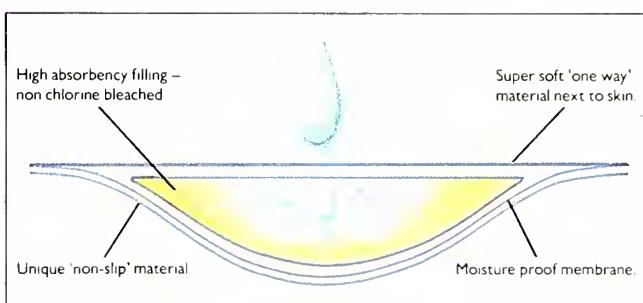


For years, Robinson Healthcare, have been the established and trusted brand leader in the field of breast pads.

Now Robinson have taken a comfortable lead with the launch of an all new **shaped**

Breast Pad and a radically re-designed nursing pad.

Robinson believe these new breast pads will ensure they dominate this market, as they are everything a new or expectant mother could ever want – extremely soft, comfortable and super absorbent.



Using new materials exclusive to Robinson, these breast pads will give the mother complete confidence.

They are designed to be discreet and will not move about under clothing.

So if you want to profit from products which you know you can safely recommend, it's got to be Robinson, where care comes first.

ROBINSON
HEALTHCARE

HIPPER HOUSE
CHESTERFIELD S40 1YF
UNITED KINGDOM



NEW WYETH Gel filled TEMAZEPAM CAPSULES



THE SAME BUT DIFFERENT

Gel-filled to reduce the risk of intravenous drug abuse

Bio-equivalent to the liquid-filled temazepam capsules which they replace

In 10mg and 20mg strengths gel-filled capsules are marked 'W10' and 'W20' to distinguish them from liquid-filled capsules. Packs are clearly labelled 'gel-filled capsules'

DISPENSE WYETH TEMAZEPAM

Now available as abuse resistant tablets or gel-filled capsules

TEMAZEPAM GEL-FILLED CAPSULES

Prescribing Information

Presentation: Temazepam 10mg and 20mg in gel-filled opaque, yellow soft-gelatin capsules. **Indications:** Short-term treatment of insomnia (up to four weeks).

Dosage: Adults: 10-30mg, half an hour before retiring. In all cases the lowest effective dose should be used and treatment should be intermittent if possible. The dose may be increased to 40 or 60mg, in patients who do not respond to the lower dose because of severe or persistent insomnia. Treatment should be withdrawn gradually. Elderly: Elderly patients or those suffering from cerebro-vascular changes such as arteriosclerosis are likely to respond to smaller doses, closer to the normal adult dose. Children: Not recommended. **Contra-indications:** Sensitivity to benzodiazepines; acute pulmonary insufficiency. Not to be used during pregnancy and lactation unless clinically justifiable. **Precautions:** Concomitant administration with alcohol or CNS depressants may accentuate effects. Prolonged or excessive use may lead to dependence and withdrawal symptoms on cessation of therapy. Patients should be cautioned against driving or operating machinery until it is established that they do not become drowsy or dizzy. Rarely amnesia, paradoxical aggressive reactions, depression and suicidal tendencies have been reported. Psychological adjustment to loss or bereavement may be inhibited. **Side-effects:** Drowsiness or dizziness on waking is rare. Morning headaches, tinnitus, rashes and gastro-intestinal disturbances have occasionally been reported. **Legal Category:** POM. **CDIS:** 4. **Packs and boss:** NHS cost: 10mg x 500 - £12.06, 20mg x 250 - £10.52. **Product License Numbers:** 10mg - PL001/0106, 20mg - PL001/0107.

Further information is available on request: Wyeth Laboratories, Taplow, Maidenhead, Berks SL6 0PH.

**WYETH
GENERICs**

*Trademark

New look for Lucozade

Lucozade has a new look from the end of this month, with metallised labels reflecting a "quality premium image" for the brand. The association with energy and health has been enhanced and all flavour variants are much more clearly differentiated.

The link with energy and health is again the crux of the advertising campaign for 1990. Television commercials start in July for the core brand, including the new packaging. Poster, Press and cinema campaigns are included in the package, pushing not just Lucozade original but also the three fruit barley flavour variants.

Beecham put the value of the promotional package for this year at £18m in above and below the line activity. Beecham. Tel: 081-560 5151.



Evans add two more supplements

Evans Medical have extended their range of vitamins and health supplements with two new products launched at the Unichem trade show (see p 932).

Odourless garlic capsules (60 £2.39) and fresh royal jelly capsules (40 £4.25) have been introduced to complement the existing range of products. According to the company, this should enhance their image as quality products providing value for money.

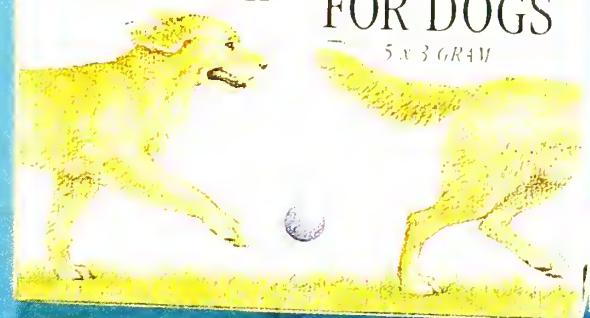
In addition, the whole range has been given a facelift. Redesigned packaging is intended to reflect the "fashionable" nature of this area of the market and provide a more up to date image, according to Evans Medical Limited. Tel: 0403 41400.

The Scented Room range can now be displayed in a merchandiser with header card, which lists the seven products available in the fragranced variants Lotus and Japonica. Farrow & Humphreys Ltd. Tel: 0225 777808.

COUNTERPOINTS

Panacur

MIXES INTO FEED



WORMER FOR DOGS

5 x 3 GRAMS

Hoechst have repackaged Panacur wormer for dogs. The PML product is the only licensed wormer that can be given to the pregnant bitch to reduce roundworm infestation in developing puppies, say Hoechst adding that it can be used in puppies from as young as one day old. The company has developed a range of literature and educational aids to help pharmacists advise the public on animal parasites and related issues. Hoechst Animal Health. Tel: 0908 665050.

Diet disc

The diet disc, said to be a new way of assessing nutritional information, is available from Nutrient Research Associates.

The disc contains data on nutrient content and calorific value for common food items. One side gives values per 100g while on the reverse the values relate to average food portions.

The Diet disc (£1.99) is available mail order in a minimum order quantity of 100. Nutrient Research Associates Ltd. Tel: 0949 20344.



Solgar supplement

Solgar Vitamins have launched VM2000, a multivitamin/multimineral/multinutritient product. The product contains 16 vitamins, 12 minerals, trace elements and amino acids in a nutritional herbal base including ginseng, lecithin, alfalfa and watercress. VM2000 is available in bottles of 30, 60 or 90 capsules retailing at £5.18, £9.27 and £13.22 respectively. Solgar Vitamins Ltd. Tel: 0494 778810.

Ames, co-sponsors of Diabetes Awareness month on Merseyside next month, have relaunched their Glucometer II in a pack designed for pharmacies to stock and sell off the shelf. The Glucometer II, with memory deluxe kit (£49 excluding VAT) now comes in a smaller "more convenient" box but still contains a complete range of equipment for self blood glucose testing. This feature will appeal to diabetes sufferers, say Ames, division of Miles Laboratories Ltd. Tel: 02814 5151.

Restyled Veracur bonus

In a change of emphasis from prescription to over-the-counter Pharmacy only sales, Veracur gel will soon be available in a restyled pack.

This will coincide with seasonal Summer promotions in national women's magazines —

including *Woman*, *Woman Realm* and *Woman's Weekly*.

In addition, a sell-in offer is available through distributors De Witt; details available from representatives, direct from De Witt International Ltd. Tel: 081-441 9310.

ON AIR MAY/JUNE

£2 Million National TV Launch



Now's the time to stock up fast on Macleans Active MouthGuard.

5 highly impactful commercials, featuring popular risqué joke comedian Bernard Manning show how even his mouth – and his limericks – are cleaned up with Macleans Active MouthGuard, an anti-plaque mouthwash with fluoride.

Macleans Active MouthGuard kills germs and bacteria that can cause plaque and bad breath so it's more than just a mouthwash.

Order now – before you run clean out of stock





Elancyl range is in the pink with science

Elancyl has gone pink, with the launch of a new bodycare range to complement the current range of "green" products.

The pink range has been designed to combat dryness, dehydration and loss of elasticity of the skin, has been hypoallergically tested by dermatologists and cosmetologists, and is suitable for sensitive skin, says the company.

Based on plant extracts, the range is said to be aimed at "body conscious" women with a high perception of the benefits of scientific skincare. All products contain vitamin E.

Evolution gets a boost from Guerlain

Guerlain have introduced sublcremes into their Evolution skincare range, designed for day and night face care.

The cremes are designed for women who prefer a product that can be used day and night for face and neck care, say Guerlain.

They come in two textures, light for normal skin, combination skin or skin with an oily tendency and rich for dry, dehydrated or devitalised skin.

Both cremes are said to provide all round protection during

Fermete Plus intensive body firming gel (75ml £12.50) is described as a toning gel to be applied to "slack" skin. It comes in a pump dispenser.

Hydra 2 moisture treatment for the body is a fine milky talc emulsion to moisturise the skin. It comes in a 200ml size (£9.50).

Soin satin finish oil (125ml £10.50) is formulated for dry and very dry skin. The dry oil spray contains oils of safflower and coprah. Soin satin leaves an invisible non-greasy film on the skin and contains UVB filters. *Pierre Fabre Ltd. Tel: 0494 451938.*

the day and aid the skin repair process during the night. Sublcreme No 1 is available in 50ml and 30ml sizes (£22.50, £14) and Sublcreme No 2 comes in the same sizes at a slightly higher price (£29.50, £18). *Guerlain Ltd. Tel: 081-998 1646.*

Philip's Café

Satinelle, the electric epilating system from Philips will be advertised on television for the first time this Summer when a two-month campaign begins in early June. The 30-second commercial, Café, will be seen on TV-am and will reach 40 per cent of women aged 16-34, say *Philips Home Appliances Ltd. Tel: 081-689 2166.*

Summertime bronze

Rimmel have put the accent on "bronze" this Summer with a collection of burnished shades for body, face, eyes, lips and nails.

Bronze glow (£3.99) is a loose powder presented in a burgundy drum that can be used anywhere on the face or body to provide a warm touch of colour.

This can be complemented with a bronze glow powder compact (£2.99), a pressed powder that comes with its own puff for easy application. It is small enough to fit into a handbag, say Rimmel, and is perfect for touching up the nose and forehead areas.

Body bronzing gel (30ml £1.99) can be used to give colour to pale skin or enhance a natural tan, and aqua shadow (£1.85) a water resistant trio of eye shadows can create Summer eyes in shades of apricot and almond. This will be available at a special offer price of £1.55.

A special formula waterproof mascara will also be available at a special introductory price of £1.29 (rsp £1.59); polished lip colour will sell at £1.39 (£1.69) in shades of

gold, beige, bronze and brick red, and fashion nail polish comes at a special offer price of £0.79 (£0.99), in colours: gold, beige, coral or red.

The "accent on bronze" collection will be available from July. *Rimmel International Ltd. Tel: 071-637 1621.*

Samsara moves to the bathroom

A bathcare line has been added to the Samsara range by Guerlain, following the initial launch of the fragrance last year.

The new range, available this month, comprises: body shampoo (£22); bath essence (£21); body lotion (£25); body creme (£35); deodorant (£18.50); talc (£15); soap (75g £6.50); soap (100g luxury travel case £10.50) and soap (3 by 100g coffret £25).

Samsara has an ambergris-based oriental perfume with dominating notes of sandalwood and jasmine and lower notes of iris, rose, violet and narcissus. *Guerlain Ltd. Tel: 081-998 1646.*



Natural beauty from the Dead Sea

Dead Sea Magik is a complete body care collection based on the unusual mineral and trace element composition found in the Dead Sea. Finders say the range can be used for all skin types but is particularly suitable for sensitive complexions.

There are five products in the range, none of which have been tested on animals, according to the company.

The mud face mask (75ml £3.55) is a weekly treatment, used after cleansing, it is said to remove deep impurities. An

exfoliant (75ml £3.75) has been produced containing fine mineral particles to slough off dead skin cells which cause dull complexions. The moisturiser (75ml £3.55) forms a "protective barrier against the elements" and can be used day or night.

For a holistic approach, the body lotion (200ml £2.35) is a light emollient, while the 100 per cent natural bath salts (500g £2.35) are said to soak away aches and pains.

The range will appeal to all ages, say *Finders International Ltd. Tel: 081-204 7255.*

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Kodak and the Kodak Paper Symbol are registered trade marks.

Konica on national TV

Konica have booked almost 1,100 television slots for commercials for its films, cameras, faxes and photocopiers this Summer.

The first burst begins this week and runs for 13 weeks on TV-am and Channel 4, with another burst planned for November 5 to December 23. Two 30-second commercials have been produced — one for Konica SR-G colour print film; the other for the Konica A4 camera. They and the 40-second commercial for faxes and copiers promote the company's corporate identity.

The campaign is being backed by point of sale material echoing facts on Konica film sales, such as "over 10,000 pictures are taken every minute on Konica film".

Konica (UK). Tel: 081-751 6121.

Vivitar 'buy back' offer

Hanimex-Vivitar have announced a buy back campaign on all Vivitar V2000 and V6000 SLR cameras.

From May until the end of April 1991, purchasers of these cameras send a registration document, guarantee card and proof of purchase to the company. A certificate of registration is issued in return.

If, after five years, the purchaser wishes to sell his camera the certificate is returned to Vivitar who will redeem the full buying price of the camera.

There are no conditional guarantees; the camera may be returned for sale in any condition, says the company. The campaign will be supported by full page advertisements in the specialist photographic Press. *Hanimex-Vivitar Ltd. Tel: 0793 526211.*

Fuji are launching a £1m advertising campaign for their Quicksnap range. Commencing during ITV's Telethon, the four-week series of advertisements will appear at prime time on LWT. The campaign will focus on the handy nature of the cameras, and their usefulness in surprise circumstances, say *Fuji Photo (UK) Ltd. Tel: 071-586 5900.*

Agfa Retail Group is spending more than £1m in a television campaign to promote Agfacolour XRG colour print film. The campaign broke this week and in-store consumer offers and display support the campaign, designed to demonstrate the clarity of the film. *Agfa-Gavaert Ltd. Tel: 081-560 2131.*



New Mentadent P gets a licence

Elida Gibbs are claiming a "breakthrough formulation" with their reformulated Mentadent P toothpaste which has been awarded a product licence (2783/0007).

New Mentadent P contains sodium monofluorophosphate 0.85 per cent, zinc citrate trihydrate 0.5 per cent and triclosan 0.2 per cent to reduce plaque and help prevent the onset of gum disease. The patented formula has been subjected to extensive clinical trials that show it is effective in reducing plaque and gingival bleeding, say Gibbs.

In a British study, subjects who brushed with the new formulation had 30 per cent less plaque and developed 75 per cent less gingival bleeding than those using a normal toothpaste, say Gibbs.

Packaging for the new formulation has been updated and cartons are now individually overwrapped and flashed "new breakthrough formulation". Screw-on caps have been replaced by flip top caps and packs contain an explanatory leaflet with further information on gum health.

The new toothpaste comes in a 50ml tube (£0.79) with a 100ml size (£1.39) replacing the 125ml tube. A mint pump dispenser (£1.59) has also been introduced.

New Mentadent P will be supported by a £3m campaign on

Personal care goes green

The personal care kit from Cometform has been repackaged "green style" to reflect its "environmentally friendly nature", says the company. The kit (£1.99), now comes in a green pack which is described as lightweight and discreet. *Cometform Ltd. Tel: 081-340 9834.*

Two more from Dixcel

British Tissues are launching Beatrix Potter tissues and a range of 100 per cent recycled paper products under the Dixcel brand.

Joining the Dixcel character tissues will be reproductions of some of Beatrix Potter's animals, on hexagonal boxes containing 100 white cosmetic tissues (around £0.79). The characters include Peter Rabbit, Mrs Tiggy-Winkle, Tom Kitten and Jemima Puddle-Duck.

Dixcel 100 per cent recycled tissue products are in a co-ordinated range across all three market sectors: toilet tissues, facial tissues, and kitchen towels.

Toilet and facial tissues will be available early next month, and kitchen towels in the next few weeks, say British Tissues. Toilet tissues will be packaged in two (around £0.49), four (around £0.89) and nine-roll sizes; the nine-roll product is the first multi-pack size in the "green" sector, the company claims. The rolls will come in white and pink, with new peach to follow in two- and nine-roll packs.

Facial tissues offer the options of family — 125 sheets (around £0.69), and mansize — 100 two-ply white tissues (around £0.79). Both skillets contain more than 90 per cent recycled fibres, says the company.

The total range will be supported by a multi-media campaign, including television advertising, in the Autumn. *British Tissues Ltd. Tel: 081-864 5411.*

Extra Thick

British Tissues have added a new kitchen towel to their Dixcel range — the Dixcel extra thick.

Described as "the best Dixcel kitchen towel ever", the extra thick (£0.94 to £0.99) offers 70 sheets per roll and is available in two roll packs.

It comes in five designs including white, red and green, blue and green, black and blue or caramel and brown. *British Tissues Ltd. Tel: 081-864 5411.*

ON TV NEXT WEEK

GTV Grampian
B Border
C Central
CTV Channel Islands
LWT London Weekend
C4 Channel 4

U Ulster
G Granada
A Anglia
TSW South West
TTV Thames Television
TV-am Breakfast
Television

SK Sky
STV Scotland (central)
Y Yorkshire
HTV Wales & West
TVS South
TT Tyne Tees

Anadin Extra:	All areas except TSW & LWT
Bisodol Regular:	GTV, U, G, HTV, TVS, TTV, C4 & Sky
Bodyplan:	All areas except HTV, CTV, LWT, C4, TV-am & Sky
Contac 400:	TV-am
Dimension:	All areas except TV-am
Efamol evening primrose oil:	TVS
Gillette Sensor:	All areas
Hermesetas Light:	G & Y
Konica film and cameras:	C4, TV-am
Listerine:	GTV, U, STV, BTV, TT
Macleans Active Mouthguard:	All areas
Mum deodorant:	All areas
Recital:	STV, C, A, HTV, TSW

10-minute head lice treatment

Lyclear, a new head lice treatment has been launched by Wellcome. Formulated as a pleasant smelling creme rinse to increase patient acceptability, Lyclear is a single 10-minute treatment said to be effective in 99 per cent of cases after one week.

The active ingredient permethrin is a pyrethroid which affects the nervous system, killing adult lice, nymphs and eggs. In addition, the formulation contains the cationic surface active agent stearylalkonium chloride.

This positively charged compound helps hold the active ingredient in contact with the negatively charged hair shafts, so enhancing persistence. Trials have indicated Lyclear provides residual activity for up to six weeks ensuring both the original infestation and any hatching eggs are eliminated.

Lyclear is rapidly biodegradable and well tolerated, being unlikely to cause eye irritation, the company says. Its effectiveness is not affected by heat, frequency of shampooing or chlorine in swimming pools.

Lyclear (59ml, £2.68) comes complete with comb and patient information leaflet. *The Wellcome Foundation.* Tel: 0270 583151.

Numark methylated spirits is now available in two new sizes — 750ml clear plastic bottles and 5 litre portable white PVC containers. The 750ml bottles are packed in 12s (£9.92), and the 5 litre packs will cost £4.90 each. These new packs conform to safety regulations including child resistant caps, say *Numark Management Ltd.* Tel: 0985 215555.

Medo Pharmaceuticals have removed papaverine from their Pholcomed pastilles which now only contain pholcodine 4mg. *Medo Pharmaceuticals Ltd.* Tel: 06285 29662.

Arrowmed have taken over the distribution of Digifoam and the Crimpers pure range of natural haircare products. *Arrowmed Ltd.* Tel: 0420 64300.

Anaemia relief with epoeitin

Erythropoietin (EPO), the hormone that regulates red blood cell production in man, is now available as a genetically engineered hormone, for the treatment of anaemia associated with chronic renal failure undergoing haemodialysis.

An injection made by Cilag Biotech, Eprex, containing epoeitin alfa (recombinant human EPO) can be administered to patients undergoing dialysis three times weekly and eliminates the need for blood transfusions to correct anaemia.

EPO is produced by the kidney and the hormone is the main regulator of erythropoiesis (red cell production). It is secreted in response to a reduction in oxygen delivery to the kidneys and acts on bone marrow to stimulate differentiation and proliferation of red cell precursors.

Almost all patients with end-stage renal failure develop anaemia, largely due to deficiency of EPO. Recombinant human erythropoietin human was first

synthesised in 1985. A year later it was shown that intravenous administration of epoeitin alfa could completely reverse anaemia in patients with renal failure undergoing haemodialysis.

Thanks to the "wizardry of molecular biology", one of the last untreatable endocrine deficiencies will be amenable to simple replacement therapy, say Cilag.

Manufacturer Cilag Ltd, Saunderton, High Wycombe, Buckinghamshire, HP14 4HJ

Description A sterile, clear, colourless, aqueous solution for intravenous injection containing 4,000 u/ml epoeitin alfa and 2.5mg/ml human serum albumin in 1ml ampoules

Uses Treatment of anaemia associated with chronic renal failure in patients on dialysis

Dosage Initially 50u/kg three times per week given as an iv injection over one to two minutes. Further dose increments depend on the rate of haemoglobin increase (see Data Sheet for dose schedule)

Side effects Increased blood pressure, thrombosis of vascular access sites, flu-like symptoms, bone pain and chills following injections, seizures, skin reactions, palpebral oedema, possibly allergic in nature

Contraindications, warnings etc There are no known contraindications to Eprex use. If hypertension develops fluid overload should be excluded and treatment with antihypertensives started.

Use with caution in patients with uncontrolled hypertension, ischaemic vascular disease, history of seizures or suspected allergy. Monitor haemoglobin no less than weekly; also monitor blood pressure, serum electrolytes, predialysis urea and creatinine and potassium intake (see Data Sheet)

Supply restrictions POM

Packs Packages of six ampoules (£216 trade) each containing 4,000 u/ml of epoeitin alfa

Product licence 0076/0136
Issued May 1990

Genotropin approved for Turner Syndrome

Genotropin has been approved for use in Turner Syndrome: it is the first commercially available authentic human growth hormone that can be used for the condition, say Kabi.

Turner Syndrome affects about one in 2,500 live female births in the UK. It is caused by a chromosomal abnormality, and as such cannot be cured. Its most obvious feature is a short stature, with the average affected girl

reaching only 143cm (average normal height of girls is 162cm).

Studies have demonstrated that therapy with growth hormone can improve the growth rate to a normal level, and help girls achieve an acceptable height, say Kabi. The condition must be diagnosed and treatment with Genotropin started early; the sooner this is done the greater the prospect of reaching normal height, the company says.

BRIEFS

Mepra-Pharm have launched Diarphen tablets which contain generic co-phenotrope (diphenoxylate hydrochloride 2.5mg and atropine sulphate 0.025mg 100 £9.31, 500 £46.55 and 1,000 £93.10 (all prices trade). Products are classified POMCDI and the licence number is 0322/0037. *Mepra-Pharm.* Tel: 081-907 4332.

Capoten tablets will no longer carry the CSM black triangle symbol, say *E.R. Squibb & Sons Ltd.* Tel: 081-572 7422.

Kaltostat 7.5cm by 12cm dressing will be available on FP10 from June 1 (£1.22 per dressing trade). Complementing the 5cm by 5cm size already prescribable, this larger dressing will be particularly appropriate for wet wounds with an exuding area greater than 50sq cm, say *Britair Ltd.* Tel: 0252 333314.

Kerfoot say that the colour of bulk packed naproxen 250mg and 500mg tablets is changing from white to yellow. Blister packed tablets will remain white until

current stocks run out. Kerfoot now have co-tenidone tablets available in two strengths 50/12.5mg (28 £5.27) and 100/25mg (28 £7.50, both prices trade). *Kerfoot Pharmaceuticals.* Tel: 061-330 4531.

B. Braun Medical say that the labels on outer cartons and on Miniplasco ampoules containing sodium chloride 0.9 per cent intravenous infusion, have been changed from blue and white to black and white. *B. Braun Medical Ltd.* Tel: 0296 393900.

For First Class Quality & Value, the choice is *Eesiness* itself!



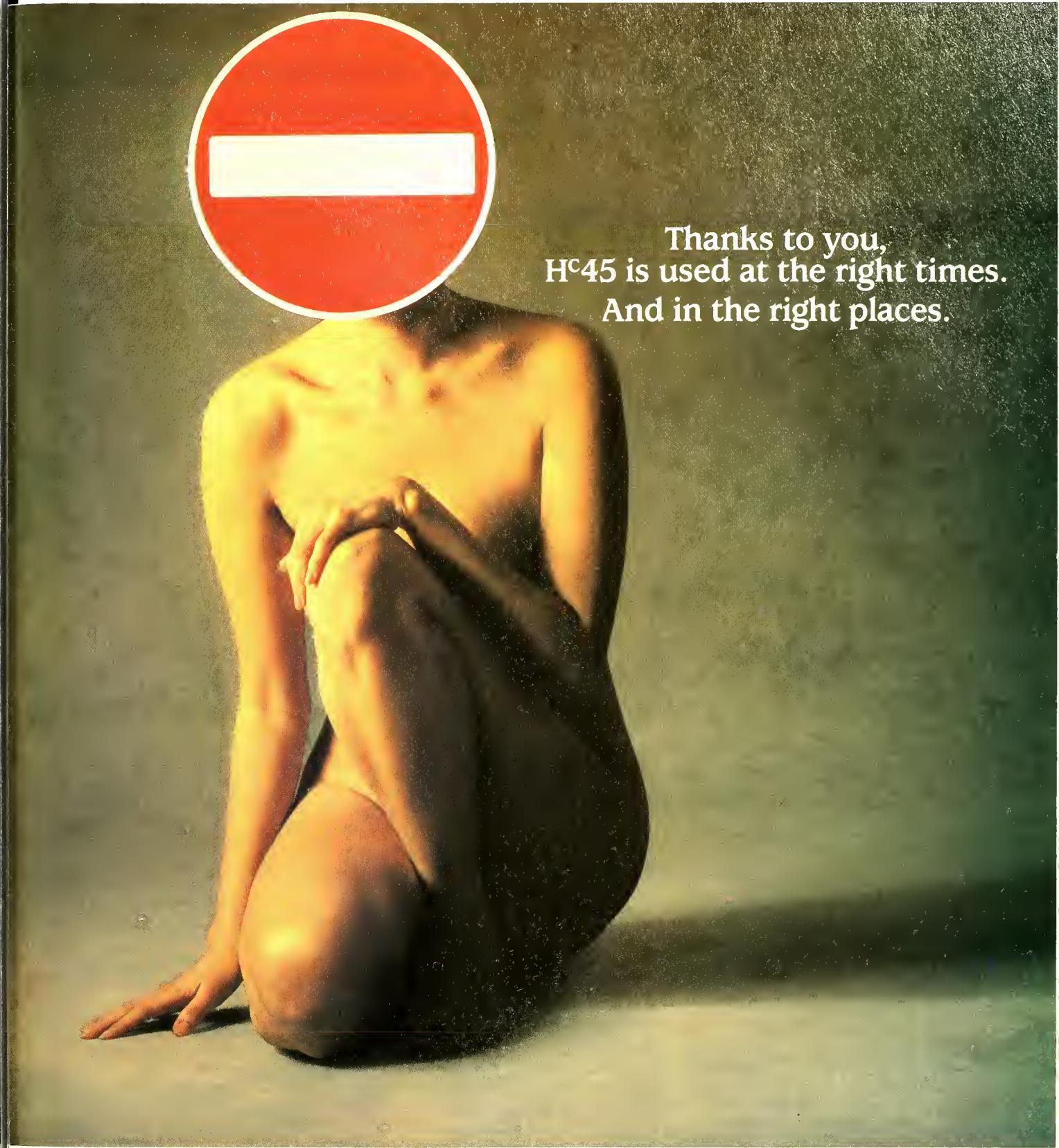
Complete Made-to-Measure service in traditional qualities including Flatbed Knit, One Way Stretch and Nylon Net.

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Thanks to you,
HC45 is used at the right times.
And in the right places.

HC45 is an effective treatment for irritated and inflamed skin conditions. And as you know, 1% hydrocortisone is quite safe, especially when used under your direction. To check that customers are taking your advice, we commissioned a series of comprehensive studies.

The results are extremely positive. You're giving your customers good advice, and they follow it. Studies have shown that the vast majority of your customers use hydrocortisone only on their hands, wrists, arms, legs and body. And, even more important, they are using it for seven days or less.¹



Of all purchasers, 85% bought hydrocortisone following a medical professional's advice. And an overwhelming majority of these professionals were your colleagues. Pharmacists also advised their customers on how to use hydrocortisone properly, and two thirds of the customers remember the advice.

These studies have proved conclusively that HC45 (recommended twice as often as any other brand) is as safe as it is effective.

And they have also proved that, thanks to you and your colleagues, people use it wisely.



As gentle as it's effective.



Re: I. Martin Hamblin Research
The purchasing of OTC
Hydrocortisone January 1990

“ My first venture on my own account took place in 1915 when I bought the business of Mr N. Keen, chemist & druggist of 48 High Street, Feltham. The 1914-1918 War was at one of its blackest periods and Mr Keen, nervous and uncertain about the future, had decided to sell his shop.

Seldom can a pharmacy have been bought and sold under such strange circumstances. Blackout restrictions had just been put into force and my only inspection of the shop was done by candlelight, for I was then living in Torquay and did not reach Feltham until 8pm. In order to make the necessary connections I had to start my return journey only an hour later, so I had no opportunity of seeing what Feltham looked like, and it was little more than a village in those days.

All the rest of the negotiations were completed by post, and this transaction was the greatest business risk I have ever taken. During the intervening weeks between that brief study by candlelight and my actual taking over, I spent many sleepless nights, for I was sinking the whole of my resources and taking with me a wife and young son into an uncertain future. **”**



Edgar Moss outside his first business at 48 High Street, Feltham, with his young son

In the beginning... ...there was Edgar Moss

In the 75 years since Edgar Moss bought a pharmacy in Feltham, Middlesex, the business has grown, by steady expansion, to 85 units, firstly across the home counties and, since 1985, further afield through a link with the Asda superstores chain. *C&D* reports.

Thus Edgar Moss, then aged 36, recorded the beginning of the enterprise that this year celebrates its 75th birthday. Feltham in those days was a quiet village. There were no street lights, Heathrow Airport, now only a few miles

away, was undreamed of, and London Transport posters were advertising "Come to Feltham for a day out in the country". One of the company's older employees remembers moving to the area because it was the nearest

he could get to London and still hunt rabbits.

It took Edgar Moss six years to feel sufficiently confident to think of expansion, but in 1921 the company archive records that he took over the lease of a lock-up shop at 30 Station Road, Hayes, for the princely sum of £60 per annum. The company still operates out of the same premises (the lease was renewed in 1955 at £400 per annum to run for 100 years, which might have something to do with it!). By 1923 the retail business had expanded to four outlets, and the need for a warehouse was becoming apparent. Edgar Moss bought a corrugated iron army hut from the Army Disposals Board and erected it in his back garden in Ashfield Avenue, Feltham.

His son, Harold Moss, joined the business in 1929 as manager of the company's fifth shop in Southall after qualifying from Chelsea in 1928. The army hut had become too small by

Moss in the '90s — if you can't beat 'em, join 'em!

Barry Andrews, the current managing director of E. Moss Ltd, joined the company in 1965 straight from college as a management trainee. He became managing director in 1986, during what was perceived as a time of crisis for the company. The new contract was still on the drawing board and leapfrogging was rife. Drugstores were making a substantial impact and High Street rents were escalating, making it difficult, if not impossible, to operate traditional pharmacies in main shopping areas. Food superstores were also becoming an accepted part of the shopping scene.

To meet the threat Moss went back to basics — its professionalism and the high level of staff service, says Mr Andrews. "We cut out a lot of the diversification. We went back to health and beauty — a move since followed by Boots — and concentrated medicines and babycare," he recalls. "We also felt the place to be was alongside the food superstores. They were looking for extra services and the most commonly requested facility was a pharmacy, but they were reluctant in most cases to take it in-house."

The company wrote to a number of supermarket chains. Asda was the one that



E. Moss managing director Barry Andrews responded and Mr Andrews is sure Moss were chosen because of their high professional standards. The company now has 31

pharmacies within Asda superstores and the link has provided virtually all the impetus for expansion in the past five years. In 1985 the company's 50 stores were all within a 50 mile radius of the Feltham, Middlesex headquarters. Now operations stretch as far north as Aberdeen and west to Caerphilly. All are supplied from the Feltham warehouse, which is possible because such outlets sell only high value, low volume lines such as medicines and cosmetics.

But the company is still expanding on a community basis, says Mr Andrews. The occasional advertisement for premises appears in the classified sections of the pharmaceutical Press. Moss has to keep a careful eye in developments in its Middlesex heartland where there is one pharmacy per 2,200 inhabitants, well below the national average.

Mr Andrews feels the company still takes the paternalistic approach begun by Edgar Moss. He still recruits all full time managers personally and considers it one of the more important aspects of his job (the high proportion of women management staff is because of their higher standards and

this time and Edgar Moss seized an opportunity to acquire larger premises in Bedfont Lane, Feltham. This was a motor repairer's business with a number of lock-up garages. Branch deliveries were made by motorbike, and since Edgar Moss kept the care hire operation that came with the garage going, the business found itself for a short time diversifying. The garage premises eventually



Edgar Moss was born at Hanley in Staffordshire on June 30, 1879, the youngest but one of a family of six. He was a sickly child and only received a limited education. By the time he was 20 he was largely restored to health and set about filling the gaps in his education. Because he was compelled to work full-time during the day, he had to study at night. Eventually he saved enough money to afford a course of study at Manchester from where he qualified in 1902 aged 23. During the ensuing 13 years, he filled management positions in the Potteries, then later in Wales, the Isle of Wight and Torquay, before going into business on his own account. Edgar Moss died in 1958.

communications skills, he insists). "I do not feel there is any conflict between the professional and commercial sides of pharmacy. We are a most successful commercial company," he adds. Profits last year were £1.7m on a turnover of £29m.

Company firsts

The company has claimed a number of firsts of late. It runs a wholly professional pharmacy (with no OTC toiletries trade) and was installing consultation areas before the Nuffield report was published. It also claims to be the first to institute an in-house continuing education course for pharmacists. Keeping abreast of the times, all branches hold patient medication records and within a few weeks all managers will be able to receive management information on-line.

Mr Andrews has kept up Harold Moss' tradition of an involvement in pharmaceutical politics. He is a director of the Company Chemists Association, and chairman of the Middlesex Pharmaceutical Group (an association of the five Middlesex LPCs). He also has an interest in education, being a member of the SW Thames Regional Education Committee and the pharmacy advisory committee to the Health Education Council.

became the site of the company's transport division and remains so to this day.

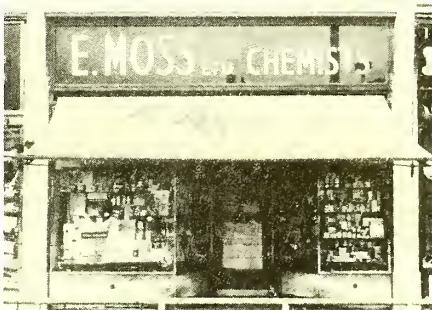
A milestone in the history of the business was reached in 1934 when, with eight branches, Edgar Moss, Dispensing Chemist, Feltham and branches, became E. Moss Ltd. Branches throughout West Middlesex. Edgar Moss was joined on the board of the new company by his son Harold and Kenneth Richardson, who had four years previously become the manager of the Staines branch. Mr J.R. James, the only non-pharmacist ever to sit on the board (apart from Mrs M. Moss, Harold's wife), completed the quartet. Having travelled widely in Europe as a valet and served in the Navy during the 1914-18 war, Mr James had opened a tobacconists and fishing tackle shop in Shepperton where he had formed a strong personal friendship with Edgar.

Within two years further growth necessitated a still larger head office and warehouse. Edgar Moss had previously purchased a plot of land in Fern Grove which he offered to the company. The company headquarters moved there in 1936 and has stayed ever since, although the premises has been substantially expanded. With expansion in mind the company also bought a substantial strip of land from a neighbouring timber merchant, which was to have interesting repercussions.

The war years brought the usual hardships. Three of the company's 15 branches were damaged by "enemy action", but were swiftly back in operation. In other spheres it was business as normal: in 1941 the Government of the day introduced purchase tax and Harold Moss, who had taken over much of the day to day running of the company by this time, had the foresight to have E. Moss Ltd registered as a wholesaler. This was to stand them in good stead in later years against the Inland Revenue!



A. Moss Chemists store 1990s style



...compared to a typical fascia of the 1930s. This one was at 225 Station Road, Harrow

E. Moss have always actively reviewed the performance of branches, and are as ready to dispose of unprofitable sites as to acquire new ones. The company's records show that the Windsor branch was sold in 1945, when sales stood at £3,861 with net profit of £602 per year. It was also during the war that the decision was made to close the "2d a week" lending libraries that existed in three branches.

In 1945 a staff pension scheme was started, and in 1947 a marriage dowry, payable to female staff on their wedding day as long as they had been with the company for six months, was instituted. It amounted to a month's salary for each two years of consecutive service up to a maximum of ten years. A profit sharing scheme was set up in 1948.

The company's 25th branch was acquired in 1950. The successful policy of steady, cautious expansion which was so evident in Edgar Moss' ideas throughout his business life continued, and by the time the company reached its 50th anniversary in 1965 it boasted "36 modern pharmacies, together with three specialist photographic shops".

In 1966 the warehouse was further extended, but the project brought grief to the builders, who got the job on a fixed price contract. While digging the foundations they encountered an enormous sawdust pit from the old timber yard that was previously on the site. The task of excavating and filling this vast hole drove them into bankruptcy.



The hole that drove the builders to the wall in the 1966 warehouse expansion

Having long ago given up the motor hire business Moss diversified again in 1969, although this time into an area closely related to the mainstream business. The company's industrial sales division was set up "to develop the undoubted potential for medical and surgical supplies which exists in many local factories in and around the area". The business has grown and now supplies a number of leading companies such as Debenhams, Marks & Spencer, and British Airways — a "Moss" first aid kit is carried on every aircraft.

Moss Chemists is well known today for its association with Asda, but the company's first move into operating concessions took place in 1971. A confidential letter to managers said they "would no doubt be interested to learn that the company has concluded arrangements

Continued on page 922

Pick up the veracur gel Bonus. The Painless Treatment for Verrucas



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Veracur Gel. Contains formaldehyde solution BP equivalent to 0.75% w/w formaldehyde on water miscible gel base. Available in 15g tube.

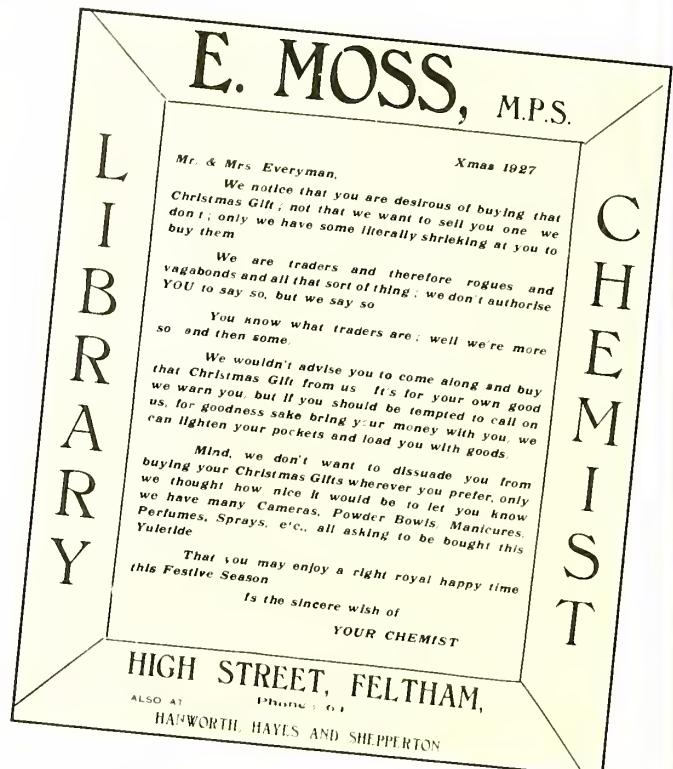
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Harold Moss took the company through its major period of development before and after the War years until his retirement in 1974. He continued as chairman of the board until his death in February, 1981, while on vacation in Barbados. Harold Moss was well known in pharmaceutical circles. He was chairman of the National Pharmaceutical Association until 1958, and an honorary life member of the US National Association of Retail Druggists. He was also chairman of the Central NHS (Chemist Contractors) Committee, now the PSNC and involved with Unichem in its early days. In 1969 he was awarded an OBE



This is the first of many advertisements which appeared in local papers around Feltham in the 1920s and '30s. The copy, written by Edgar Moss himself, takes a rather unusual approach. By 1951 the advertising budget had risen to £750 for a period from October running through the Winter months. The company produced a large number of nostrums at this stage, which were also extensively promoted locally

with Tudor Williams Ltd, the well known department store in New Malden, to operate their toiletry and cosmetic department on a concession basis". This arrangement continued until 1980 when it was terminated by mutual agreement.

1990 finds Moss celebrating its 75th anniversary as the largest pharmacy multiple still in private hands. The company has just won a PPSC case in Thetford, Norfolk, and plans to open its 86th branch there in October.

**CHEMIST &
DRUGGIST**

PHARMACY TRAINING SEMINAR

CO-SPONSORED BY

KIMBERLY-CLARK

INCONTINENCE

This is the fourteenth of a *Chemist & Druggist* initiated series of training seminars for pharmacists and their assistants — sponsored jointly with companies which have a particular expertise in the chose subjects

Signs, symptoms and treatment

by Dr Sarah Creighton, clinical research registrar, St Georges Hospital, Tooting

Incontinence is defined as the involuntary loss of urine which is a social or hygienic problem and is a distressing and disabling condition. It is a common complaint, particularly in women, and one recent study found that 41 per cent of women complained of incontinence at some time.

It is considerably less common in men although accurate figures are not available. Children may suffer from incontinence usually in the form of nocturnal enuresis (bed-wetting) which affects approximately 1 per cent of children. Incontinence is, however, a "taboo subject" and many patients (especially women) suffer in silence. Only recently are more people coming forward with this complaint.

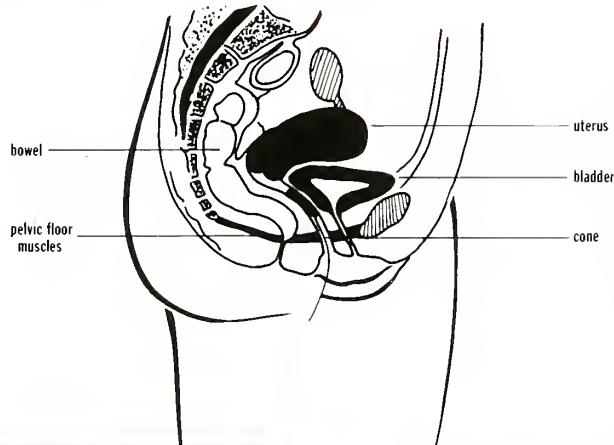
The causes

The two main types are *stress* incontinence and *urge* incontinence. In women stress incontinence accounts for about 40 per cent of cases and urge incontinence for about 30 per cent of cases.

Other types of incontinence are less common but include *retention with overflow* (usually due to an enlarged prostate in men, but in women may occur after pelvic surgery), *reflex* (a loss of sensation due to spinal cord damage), *fistulae* (an abnormal connection between the bladder and vagina), and *functional incontinence* in the elderly or mentally frail who either have lost the awareness of the correct place to pass urine or are unable to reach a toilet in time. It must be remembered that in the elderly, something simple such as a urinary tract infection or reduced mobility after a fall can precipitate incontinence in a previously continent person.

Stress incontinence is due to sphincter weakness ie weakness of the valve mechanism which normally keeps the bladder neck closed. This is due to pelvic floor damage usually (but not always) caused by childbirth. It is aggravated by obesity, chronic cough, constipation and the menopause.

The patient complains of leaking on coughing and sneezing. If mild the patient may only notice it on exercise (such as squash or aerobics) but if severe it may occur with standing or walking. Stress incontinence in men is rare but may occur following surgery



to remove the prostate gland.

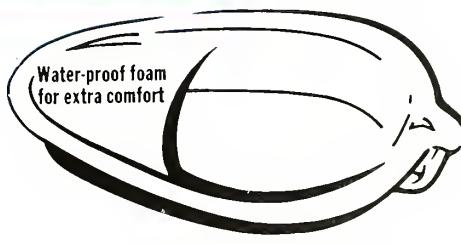
Urge incontinence is due to over activity of the bladder muscle (the detrusor muscle). In the majority of cases the cause is unknown but in a small percentage it may be due to neurological causes such as multiple sclerosis or spinal injury. Urge incontinence is more common in the elderly.

The patient complains of

urgency (having to rush to pass urine), frequency (passing urine more than seven times during the day and getting up more than once in the night), and urge incontinence (starting to pass urine before reaching the toilet).

Pelvic floor exercises

Both of these two common conditions can be treated, and in many cases, cured. The treatment of stress incontinence in women in the first instance is pelvic floor exercises including vaginal cones. Pelvic floor exercises consist of squeezing the pelvic floor several times a day — the correct methods of doing this are usually taught by a



Slipper bedpan for women

The continence advisor — the specialist in the advice chain

physiotherapist or specially trained nurse. *Vaginal cones* consist of a series of small conical weights of increasing heaviness which are held in the vagina for 15 minutes twice a day. As the weight of the cone held is increased, the pelvic floor becomes stronger.

To be effective, however, pelvic floor exercises must be continued indefinitely and many patients give up. In severe cases, or where exercises have not helped, surgery is indicated. Most operations work to lift up the bladder and the cure rate is good at about 95 per cent.

Stopping the urge

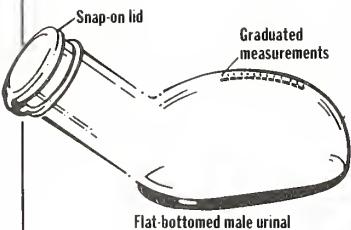
The treatment of urge incontinence is by drugs. These include *anticholinergics* (eg. *propantheline*), *calcium channel blockers* (eg. *terodilane*), *tricyclic anti-depressants* (eg. *imipramine*) and *musculotropics* (eg. *oxybutynine*). These are often successful but side-effects include dryness of mouth and blurring of vision.

Other methods such as *bladder retraining* have been used successfully. Bladder retraining involves teaching the patient to control their desire to pass urine and only empty their bladder at set times. The interval between passing urine is increased gradually to a normal time limit.

Other cures

The treatment of the rarer causes of incontinence described previously is more complicated. Retention with overflow is usually treated in men by an operation to remove the prostate gland and in women may be treated by widening the urethra (the connection with the bladder to the outside). Fistulae are usually treated with surgery to close the abnormal connection. Urinary tract infections must be treated promptly with antibiotics. In the elderly, regular help to the toilet and reminding of the necessity to pass urine may relieve the incontinence to some extent.

While undergoing treatment or awaiting surgery, good advice as to pads and pants or other appropriate equipment is essential.



**Medway Health Authority continence nurse advisor
Philip A. Gates explains his role and function, takes a look
at equipment, and suggests how pharmacists can help**

Only recently has the post of the continence advisor attained widespread recognition as a speciality in its own right. Its pioneers came from a wide range of disciplines and few held posts specifically concerned with the caring of the incontinent person.

Today the situation has changed dramatically, and most Health Authorities have at least one advisor in post. The primary function of a continence advisor is to promote continence by providing an educational and advisory service for other professionals, and all those caring for the incontinent person.

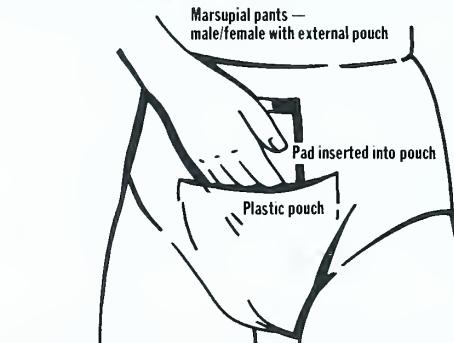
Most advisors come from a nursing background, and have completed an English National Nursing Board Course No 978 — "Promotion of continence and management of incontinence." Advisors also see individuals, which provides professional credibility, and experience of new techniques and products.

Counselling role

If there is open access from members of the public the advisor may see sufferers who have been reluctant in the past to refer themselves to a medical opinion. A careful history of the problem would be taken, in complete privacy, which allows the problem to be fully explored. While pads and pants are the obvious method of containing incontinence, other methods or a cure for the problem would probably be more appropriate.

The advisor will see clients who have had operations, such as prostatectomy and may still be having urinary incontinence. Careful explanation of the operation and advice could include pelvic floor exercises, bowel management, in addition to pads or a sheath, are of help to the client.

Many chronically sick people are cared for by relatives, and support and advice often by a visit or phone can help in this often stressful situation. Unfortunately continence advisors are often the only group of professionals prepared to listen to sufferers, without just giving pads to mop up. The idea that incontinence is part of old age is widely, but wrongly, accepted.



Services available

1. A continence advisor is a resource person for other health care staff. Many pharmacists have problems clarifying scripts for the many types of catheters, sheaths and urine bags available on FP 10. Exact specification for catheters,
2. While most health authorities provide a domiciliary incontinence

should include latex, silicone or coated type. Balloon size, and male or female length are vital if the client is to receive the best service. Most continence advisors receive visits from company reps and file most current catalogues.

A growing market

Mark Rimmer, sales and marketing executive for Depend at Kimberly-Clark, takes a look at the UK retail market for incontinence products

Almost three million adults in the UK suffer from incontinence. The psychological effects are often understated. There is often the feeling of childishness coupled with dirtiness, but it goes a lot deeper than that, because no-one wants to talk about their problem.

They feel isolated, thinking they are the only one with the problem. They worry about getting older and problems it will bring.

Incontinence affects their social life as well — trips have to be planned around toilets and even people close to the sufferers are not able to talk about it.

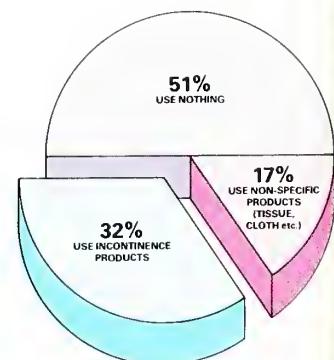
Product sources

Most products are supplied through the National Health Service. If a patient is resident in a hospital or retirement home

they will be supplied with the necessary product.

A sufferer living at home would need to consult his or her GP in the first instance. The GP would then refer this person to a continence advisor. The continence advisor would then recommend appropriate treatment and suitable absorbent products.

Product usage



However, availability of these products varies by health region; some regions are generous in the provision of these products but many are not. In addition, the quality of products supplied is often rather poor, since NHS budgets are being squeezed and products purchase price for regional health authorities is a major factor.

pad service to those in their own homes, many pharmacies should stock a small quantity of body worn pants and bed pads. Liaison with the local continence advisor should provide information regarding current thinking on the most cost-effective type to be stocked.

3. Some continence advisors take referrals from the general public — pharmacists should pass this information on to their customers. 4. Study days are often organised by continence advisors — the Association of Continence Advisors has details of regional and national events at which manufacturers exhibit.

Equipment available

This includes pads and pants; female urinals which are collecting devices similar to male urine bottles but with a wide shaped neck or slipper type urinals; male urinals, some with urine bottle valves to prevent spillage; and male urinary sheaths eg two piece types or self adhesive types.

Intermittent self catheterisation (ISC) is a relatively new technique to this country. Not all nurses and doctors are fully aware of this procedure. It was first used on spinal injury patients

in the USA in the early 1970s.

The procedure is usually prescribed by a consultant urologist after investigation.

The patient will need to be carefully taught to do this, by a nurse or continence advisor. If manual dexterity, or eyesight is poor, a relative or carer will have to be trained. The anatomy and physiology of the bladder, and storage and washing of catheters should be explained.

ISC is used when there is a large residue of urine in the bladder of over 100mls, and less than 400mls of urine should be

drawn off on each occasion. The patient or relative or carer should be well motivated. If urinary incontinence and frequency are suffered there is more chance of acceptance of this procedure.

The technique involves a small 10 or 12 fg Nelaton (for males) or shorter (Scott) catheter for females. It is inserted into the urethra and withdrawn again after all the urine has been drained off. A lubricant may be used, or there is a catheter available, which has been pre-coated with a lubricant.

It is not a sterile technique, just clean. Catheters can be used

for up to one week. Booklets are available from the manufacturers.

Pharmacy pointers

1. If the opportunity arises specialise in the provision of body worn pads and pants to include shaped and rectangular pads together with various sizes of net pants, and for light incontinence "super absorbent" types.

Customers often need to purchase pads in addition to NHS supplies.

2. Bed protection — disposable bed sheets are being used less now with the introduction of reusable absorbent washable pads.

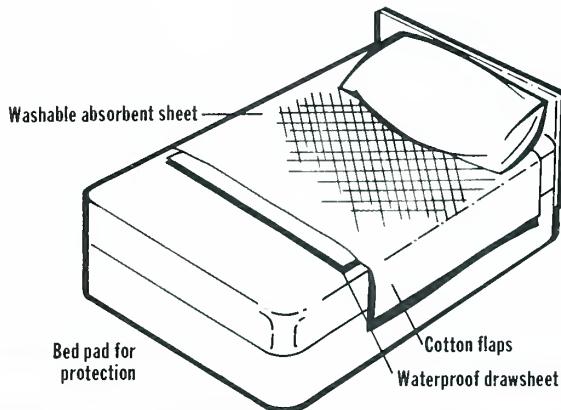
3. Keep catalogues of all leading manufacturers products for: catheters, leg bags, urinaries, sheaths and pads and pants.

4. If there is a continence advisor in your area, make use of his or her services. The ACA produces a list of members working in Health Authorities.

5. Make available to the public brochures of items that can be ordered.

6. Do not make incontinence a dirty word. Be sympathetic in your approach to a customer, it's very embarrassing for them, as well as yourself.

The ACA, 380-384, Harrow Road, London W9 2HU.



The retail opportunity

It is clear, therefore, that there is a major opportunity for community pharmacists.

Over the next three years the retail market will grow from its current 12 per cent share of total business to a dominant 53 per cent share in 1993, aided by advertising. Two main factors will fuel this growth:

1. People are living longer due to factors such as advances in medical technology and a greater emphasis on healthy living — there are now more people aged 55 and over. This age group also have a much greater spending power, and they require a better lifestyle than the senior citizens of 20 years ago.

Only 50 per cent of men now work after 60, and 49 per cent of 55 plus households are owned outright, compared to only 24 per cent of the rest of the population. This fact along with better company pensions means that the 55 plus age group has a high discretionary income, ie after the essential bills have been paid (mortgage, heating, food, etc).

2. There is more self-care at home. The increasing trend towards self-help has encouraged more individual therapy and treatment and, therefore, greater mobility and livelihood.

In America retail drug stores/chemists have home health care sections comprising of

incontinence products, bed-pans, crutches, etc. Only five years ago such products were not found. This perhaps reflects what will be achieved in the UK.

As incontinence is such a taboo subject it is very important to remove that stigma. This needs to be the underlying theme of any advertising strategy. It must attempt to normalise the problem.

It is essential that any retail introduction is supported by a freely available advisory service. Most advertisements should contain a freephone number allowing people to request samples.

Once sufferers have tried the product and wish to purchase, it can be the case that they are not sure where to buy them. Most companies can direct customer to stores near them which stock their products. And some companies offer a home delivery service. Helping to "normalise" the brand and encouraging trial are two key objectives of advertising.

It is crucial that a full range of products is available in-store at all times because not only can incontinence occur with differing degrees of severity.

People change their products depending on their circumstances, eg the product used "around the house" may differ from the one worn to go out, when more security is felt necessary.

Educational leaflets need to be clearly visible as many sufferers

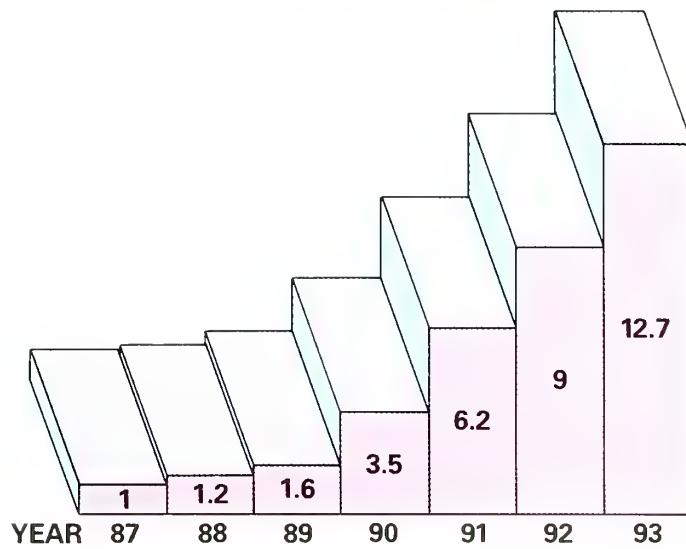
are not sure which product is suitable for them or are just too embarrassed to ask for advice.

Stocking a good range of incontinence products offers pharmacists the opportunity to:

1. Enjoy incremental business
2. To establish a home health care section in your chemist store
3. To provide a much needed product and service to the local community.

UK INCONTINENCE MARKET PROJECTION

£ MILLIONS POUNDS (AT R.S.P.)



Source: K.C.L. Estimate

Without the Depend® range this is how your Pharmacy looks to 2.9 million people.



Last year we launched the Depend range of absorbent products for people with bladder control problems.

Amazingly, given the fact that there are 2.9 million sufferers, it's the first time such a complete range of products has been available over a chemist's counter.

The launch of the Depend range was accompanied by a heavyweight national advertising campaign, which included the offer of free product samples.

Literally tens of thousands of people responded to this offer, opening up a massive new market for anyone running a pharmacy.

As our advertising continues, we expect more and more sufferers to search out the Depend range.

If you stock the range, they won't have far to look.

And you know how your pharmacy will look if you don't.

Depend® ABSORBENT PRODUCTS

For more information about this successful range of products, simply return this coupon to Depend Product Advisory Service, Dept. DA, Kimberly-Clark Limited, Larkfield, Maidstone, Kent ME20 7PS, or call free on 0800 521142.

Please ask your salesman
to get in touch.

Please let me have further
details and samples.

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Position _____

Business Name _____

Address _____

Postcode _____

Telephone _____

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 **Kimberly-Clark**

Dispensing — conflict or co-operation

Pharmacy and medicine can flourish only if we put the public first. We must co-operate, not squabble.

Can we not try to see the other person's viewpoint? Even David Roberts and Sir George Young might not be 100 per cent wrong and misguided! And have the doctors any case for again taking up the Sawtry fight?

The rationale is supposed to be that doctors diagnose and prescribe; that pharmacists dispense. But doctors are more and more bent on dispensing, while pharmacists are encouraged to acquire knowledge and skills formerly regarded as the preserve of doctors. Both professions are homing-in on the other's activities and dissipating their specialised training.

For the public it is logical for medicines to be obtained where they are prescribed. One stop shopping!

If, as I have advocated for years, we trained a new type of professional, harmony and efficiency could be combined. My proposal is that at general practice level there is a joint qualification for pharmacy and medicine. Our new professional would be pharmacist/doctor or doctor/pharmacist.

The teachers in our schools of pharmacy and of medicine could surely devise a suitable syllabus. Alan Nathan's strictures on academics in pharmacy might or might not be warranted in some instances. But I mistrust such generalisations and have personal evidence to combat the Nathan condemnation. Academics are not necessarily out of touch with everyday pharmacy! My proposal has attracted hostility and support. I am told it is a remote if desirable ideal; that I am ahead of my time.

The main criticisms are that the change would end pharmacy as we know it, and that he or she who prescribes should not profit from the value of medicaments supplied. My reply is that the status of both professions would be raised, that the public would value their combination. As to financial considerations, the new professional should be paid for services only, and have no pecuniary interest in the value of whatever is prescribed.

Maybe some visionary pharmacist or doctor will at least begin to explore the idea—I have in my book "Pharmacy: freedom or slavery?" Maybe there are



Malcolm Cooper (left), manager of Morgans at Guildford, won the Numark/Innoxa "Weekend in Paris" competition, and receives his tickets from Innoxa's Mark Harrison

academics ready to start work on a proposed combined syllabus. Let us debate the matter. We are in sore need in pharmacy and medicine of statesmen and stateswomen as distinct from politicians. Where is our visionary man or woman?

Eric Jensen
Brighton

Crookes supporter

I am writing as an independent pharmacist from Liverpool to comment on the planned boycott of Crookes Healthcare's products by Liverpool pharmacists.

I have enjoyed a long and profitable relationship with Crookes Healthcare with good and fast service from my local representative. I intend maintaining this relationship both for my own good and for those of my customers who want Crookes' products.

Eric Goodwin
Liverpool

...Liverpool supporters

The Howard & Palmer group of eleven pharmacies situated in the Swansea and Llanelli areas wish to announce their support for the Liverpool pharmacists boycott of Crookes Healthcare products.

While our professional body might be afraid of confrontation with "the mighty Boots" we are encouraged that our colleagues in private pharmacy are prepared to take matters into their own hands. We urge all independents and groups to support our colleagues in Liverpool.

Should Boots be allowed unfettered licence in this issue it will surely be the thin end of the wedge.

Howard & Palmer pharmacists
Swansea

On the ball!

I am not sure of the possibly ages old and secret recipe that Xrayser uses to clean his crystal ball but it certainly works! How very timely his remarks in last week's C&D regarding the appearance of generic medicines, in view of the new Association of the British Pharmaceutical Industry guidelines.

Every one of us who uses and supplies generics must be very worried by the often very disparate appearance of allegedly identical products. How much more worrying for the patients.

While we all understand that the original patent holder may have registered the shape and colour of a medicine in some cases with its pack, there is no justification for the variance that occurs. Let us hope that guideline no. 2 is rigidly enforced.

Allan D. Asher
London E18

For all scaly scalp conditions

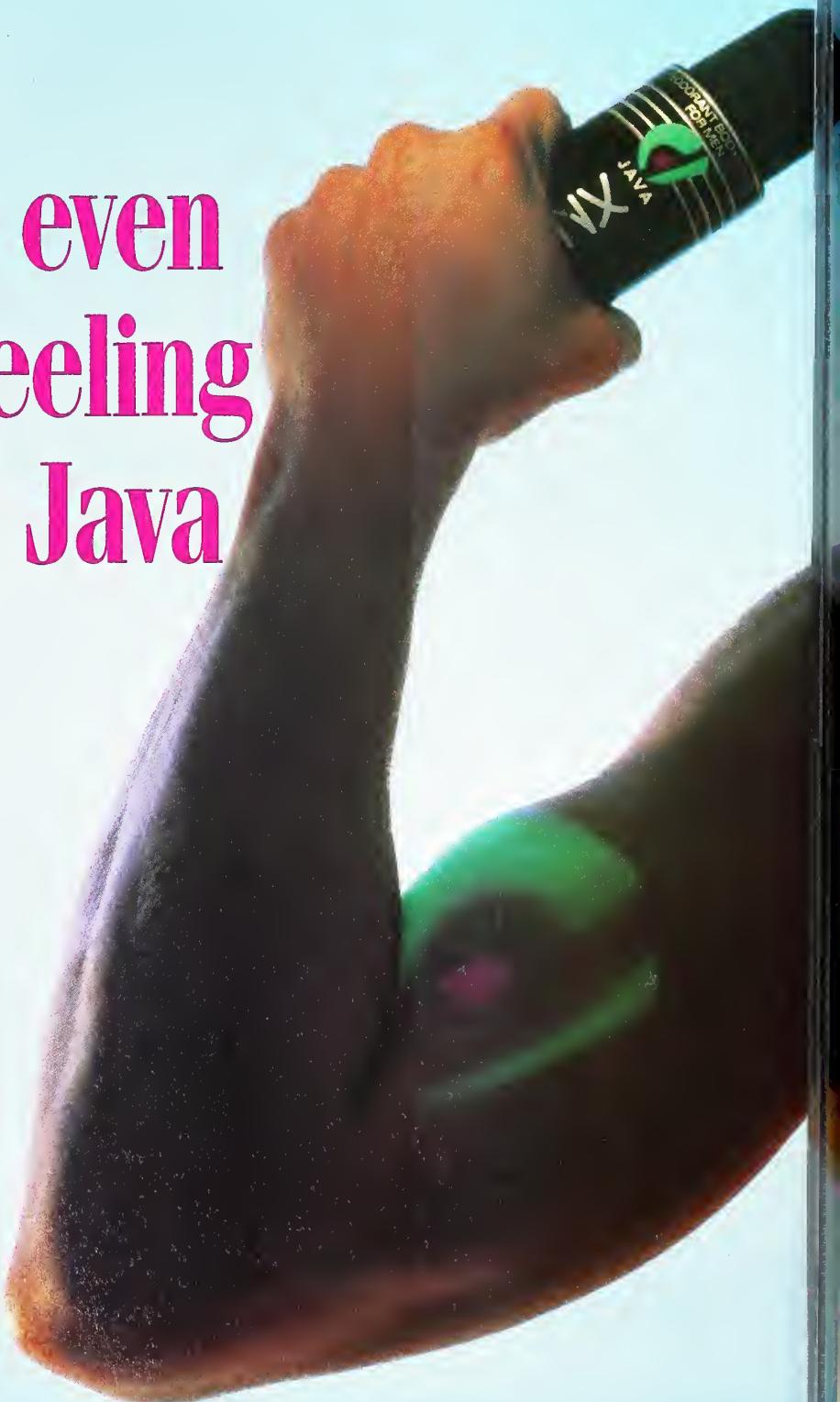
- ✓ A lightly fragranced formula with the strength of coal tar.
- ✓ Does not stain the skin, clothes or bath.
- ✓ Leaves the hair shiny and easy to manage.

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SHAMPOO**



The effective scalp treatment in a cosmetic shampoo.

Lynx – even
fresher feeling
with Java





Java is the latest fragrance from Lynx — the most successful men's toiletry range to be launched in the UK in the last five years.

Java is fresh, woody, and aromatic, with lingering musky notes designed to appeal to the traditional Lynx user, who is usually within the 15-24 age group, image conscious, interested in sport and confident of his attractiveness and sense of personal style.

Lynx set the pace for the body spray market when it was first introduced into the UK in 1985. Now, it is the clear market leader in the UK male deodorant market, with an impressive 24 per cent sterling share.

In 1987, Lynx entered the shower gel market with a refreshing product that was an immediate success with consumers and perfect for after-sport freshness. In only two years, Lynx cornered 10 per cent of the shower gel market, second only to Radox and gaining ground all the time. The Lynx success story has been completed with the introduction of an aftershave in 1989 — which sold particularly well at Christmas — creating the ultimate toiletries range for the man who cares about his appearance, and about feeling fresh and confident all day long.

Confident of success

Graham Biggs, brand manager of Lynx, feels confident that Java will be a great success, just as the last two fragrances, Oriental and Marine, have been. The fragrance has already performed very well in France and researched superbly in the UK, where an "outstanding high proportion" of men tested commented on Java's freshness and originality and said that they would try it again. Java also equalled the "fragrance preference scores" for the Marine variant, which has been so successful since its introduction last year.

"It is our firm policy to introduce a new fragrance each year to keep the range at the forefront of fragrance trends," says Graham Biggs. "We believe that it is this strategy which has helped us to grow into a

£24m brand in just five years.

The key to Lynx's appeal lies in its young, vital image. Its fragrance portfolio, which includes Oriental, Musk, Spice, Marine, and now Java, has been targeted to meet the very latest in male fragrance preferences. Positioned to fill the area of the market that exists between fine and mass fragrance, Lynx is perceived to have both class and style. This makes it perfect for freshening up during the daytime, for after sport and for a feeling of all-over lasting fragrance.

Because the Lynx image is so strong, men are intensely loyal to the brand. This, according to Graham Biggs is one of its key assets. "Lynx Body Spray is unique in offering the user two major benefits — a choice of fragrance plus the reassurance of an effective deodorant. The end result is increased self-confidence so that the Lynx man knows that he smells good, and comes back for the product again and again."

Fashion conscious Lynx

The fashion consciousness of the fragrance is also a big bonus when it comes to winning new users for the brand and retaining consumer loyalty. He says: "Sometimes people move in and out of a brand as fashions change. But with the choice of fragrance that Lynx offers, people can create for themselves a wardrobe of fragrance to suit their mood and the clothes that they are wearing without having to change brand."

Elida Gibbs will back the launch of Java with a £2.9m heavyweight multi-media support programme for 1990, with a national TV and cinema campaign, a national Press campaign and key superlite sites throughout the country.

All the traditional Lynx elements of romance, excitement and adventure will be captured in the national TV and cinema campaign, beginning at the end of May, with the highly acclaimed "Last Bus" film which was aired last year. It featured a couple escaping from a war zone on a crowded bus, with the scent of Lynx uniting them in the face of danger.

Elida Gibbs new 40-second commercial for the brand will be introduced part way through the campaign. It offers the same mix of danger, intrigue and excitement. There will also be a new 10-second announcement advertisement for Java this Summer and Lynx after shave will be advertised in the Press during the run up to Christmas.

And Lynx for Christmas

This effective media plan puts a focus on Lynx when sales are historically at their highest. After shave will again form part of the successful Lynx toilet bag, containing body spray and after shave. In addition, there will also be a Lynx clam pack containing body spray and shower gel. These Christmas packs will be promoted during October, November and December — the crucial Christmas selling period. Place your orders now and make sure that demand does not outstrip supply... Lynx...the fresher alternative.

A quiet day at Lambeth for branch representatives...

This year's Branch Representatives meeting of the Royal Pharmaceutical Society was something of a disappointment with fewer than 180 delegates, representing only 95 of the 135 branches, discussing 20 motions. Pharmacists at the meeting voted out proposals for a category of "pharmacist only medicines", warning labels on benzodiazepines and patient registration with pharmacies. The old supervision wound was quickly staunched but not before the deep rift in the profession had once more been revealed. But there was a positive mood when the idea of paid study leave was raised and delegates were fully in favour of a charity being established to start a series of "old pharmacists" homes

A call by Cardiff and South Glamorgan Branch for paid study leave for all pharmacists providing part II services gained wholehearted support from delegates to the Branch Representatives Meeting held at the Royal Pharmaceutical Society's headquarters in London, last Thursday.

Proposing, Mike Price said community pharmacists should not be expected to study in their spare time. Keeping up to date through continuing education should be adequately rewarded, he argued. He thought that initially the profession should work towards around five days a year paid study leave. After all, British Telecom's technicians need ten days a year, he added.

Ann Marsden, Gwynedd, said that properly paid study leave would at least encourage more pharmacists to take part in continuing education courses. At the moment the expenses they are entitled to when going to courses are so derisory they are almost an insult, she said.

Ian Millar, Edinburgh, supported the idea but wanted to be sure that the money allocated to pay pharmacists for study leave was new money and not just funds taken from another area of remuneration.

Old wound opened

The supervision debate reared its head once again in a motion from Slough Branch which called for pharmacists to be allowed to let dispensed medicines be handed out in their absence provided they had been dispensed under professional supervision.

The proposer, Roger Mills, explained that the motion had been worded so as to divorce it from the supervision issue, his branch simply wanted to give pharmacists the freedom to leave their pharmacies to pursue their broader role in the community, yet still allow them to serve customers who returned for their dispensed medicines when the pharmacist was not in the shop.

But that's not the way Dave Stuart from Manchester Branch



Mike Price (Cardiff)



Ian Miller (Edinburgh)



Roger Mills (Slough)



Mary Treacy (BPSA)

saw the situation. The proposal was suicidal, he said. Dispensing doctors would have a field day with this one, he suggested. The motion ignored the fact that patients would be unable to ask questions, which after all is what a pharmacist is there for. If passed, the ensuing arguments over the proposal would make last year's supervision debate "look like a tea party", he argued.

Clive Goalen, Stockport, said the idea was particularly ill timed especially now that cost-plus had gone, because pharmacists could not afford to concede anything and the motion was tantamount to the profession selling its birthright.

Ian Millar, Edinburgh, professed to being in favour of the motion. If a pharmacist decides a medicine has been properly dispensed and that it is ready to be handed out and the patient does not need counselling then surely that's a decision he can stand by.

medicines they would be cutting out contact between pharmacists and patients.

Alan Davidson, from the Society's Law Department, explained that in law sale or supply of all medicines other than those classified GSL must be supervised at the point at which they are handed out. The only exception to that might be where a pharmacy assistant had been asked by a neighbour to collect their medicines. In that case the assistant would be acting as the patient's agent and would be entitled to collect a medicine.

Roger Mills, in reply, said he accepted that a second pharmacist would be the ideal solution but in reality he thought the money to make that possible would not be forthcoming. In any case, there would always be the smaller pharmacies that would not qualify.

But it seemed delegates wanted to steer well away from an old wound and the motion was defeated by a large majority.

The British Pharmaceutical Students Association's proposal for an additional category of "pharmacist only medicines" which could only be sold or supplied personally by pharmacists and would not be advertised to the public met with strong opposition.

Mary Treacy, proposing the motion, said that patients often wait several days before they get an appointment to see their GP. In that time they may be suffering symptoms which could be relieved by a pharmacist only medicine. In fact there are many occasions when patients are suffering with a condition which their pharmacist recognises but is powerless to help because the medicine required is prescription only.

The BPSA is not suggesting pharmacists take over the role of the doctor, Miss Treacy explained, but feels such a proposal would take some of the workload off doctors.

Roger Mills felt the idea was impractical and unnecessary. First, there is already a list of Pharmacy medicines for

Continued on page 932

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BRANCH REPRESENTATIVES MEETING

Continued from p930

pharmacists' exclusive use. And second, there would be practical problems in terms of a pharmacist's precise role in selling or supplying the new category.

Roger Odd, Hull, was opposed to the idea of what he saw as a superfluous category of medicines. He agreed that more POMs should be deregulated to P but there was not point in bringing in more legislation to an established process. Instead pharmacists should campaign for a wider list of P medicines.

Tom Bissett, Sheffield, thought the proposal would show pharmacy in a poor light because it would suggest that existing Pharmacy medicines were not being supervised properly. The motion was defeated.

A proposal to put a warning label on dispensed benzodiazepines to the effect that the medicine is liable to cause dependence with prolonged use was voted out.

Putting the motion for Hull Branch, Roger Odd said it would be a positive step pharmacists could take towards reducing problems caused by benzodiazepines. Obviously medicines needed for long-term use would not be labelled with the warning, Mr Odd added.

Dave Stuart, Manchester, argued that patients taking this class of drugs were already anxious and that putting on a cautionary label of the type suggested would only heighten patients' anxiety. It could also be seen as offering a false sense of security about other drugs which are not so labelled but could be equally addictive. Pharmacists may also run into legal problems if they failed to put similar warnings on other drugs of dependence. Lastly the warning may reduce a patient's confidence in their GP.

Dr Michael Cymbalist, N. Metropolitan, although sympathetic to the motion, was concerned that because pharmacists do not always know what a drug was prescribed for they may mistakenly label a benzodiazepine which had been prescribed for epilepsy for example, and that would clearly be inappropriate.

Finn McCaul, Liverpool, argued that pharmacists are aware of the dependence problem and as advising patients is part of their job they should try to do something about it. In Mr McCaul's view a warning label would go some way to helping solve the problem.

Dorset Branch would like to see a series of small local retirement homes for elderly single pharmacists or their widows. Proposing the motion, James Skipp said his branch envisaged something along the

lines of the Abbeyfield scheme which would be a self-financing operation. Frank Bean, S.W. Metropolitan, urged his colleagues to vote in favour of the idea especially since pharmacists coming up for retirement now had served the profession through tough times.

Gordon Bird, Hertford, doubted if the profession could support such a scheme when they only gave around 35p a head last year to the Birdsgrove House fund. The motion was carried.

Once again, the meeting rejected a proposal that patients should register with pharmacies. NE Lancs Branch explained that since the topic was last proposed, more pharmacists were keeping patient records and unless patients used the same pharmacy this procedure was meaningless.

"Unless patients use the same pharmacy, patient registration is meaningless"

Barry Holden pointed out that one pharmacy might be recording one drug while another down the road might be recording a different prescription for the same patient.

Other speakers were against compulsory registration. One thought it would be better merely to publicise the benefits of using one pharmacy. Gordon Bird, Hertford, suggested that, when dispensing, pharmacists could generate a duplicate label to stick on the patient's record card for future reference.

Dr John Pickett, Brighton, thought patient registration would be workable only if all medicines were confined to pharmacies. A patient registered with a pharmacy for supplies of warfarin could still obtain aspirin at a supermarket. A better idea would be to register all medicine supplies on a smart card, which might also encourage people to buy all their medicines from pharmacies because all pharmacies could eventually have smart card readers.

Gary Choo, Bradford, warned that patient registration could become a starting point for pharmacy audit and being paid for the number of patients registered. This in turn could lead to pharmacists advertising for patients. The motion was defeated by a large majority.

Macclesfield Branch proposed that every year the Society's Council should formulate a strategic plan for the next one, and the next five years. Proposing, Catherine Raines explained that the one year plan would contain fairly detailed proposals for the profession's development while



Roger Odd (Hull)



Dr Michael Cymbalist (N. Met)



Dave Stuart (Manchester)



Peter Cooke (Dudley)



Alan Davidson (Law Department)

the five year plan would look at the longer term. Areas to be covered could include ethics, publicity, professional image, relationships with other professions, benevolence, and finance.

The proposals could be publicised and considered by the branches. Miss Raines thought the idea would increase Council's accountability and make the membership more aware of where Council was going. The motion was carried.

Other motions carried included:

■ That information on the way Council members vote on major issues should be made available to all members of the Society.

■ That Council urges the European Community Advisory Committee on Pharmaceutical Education and Training to take active steps to ensure there is harmonisation of a comprehensive common core of undergraduate pharmacy education and assessment throughout the EC.

■ Council should give maximum encouragement to students, preregistration graduates and pharmacists to experience practice in other EC countries.

■ That members working in community pharmacy should elect a proportion of the members of the community pharmacy subcommittee.

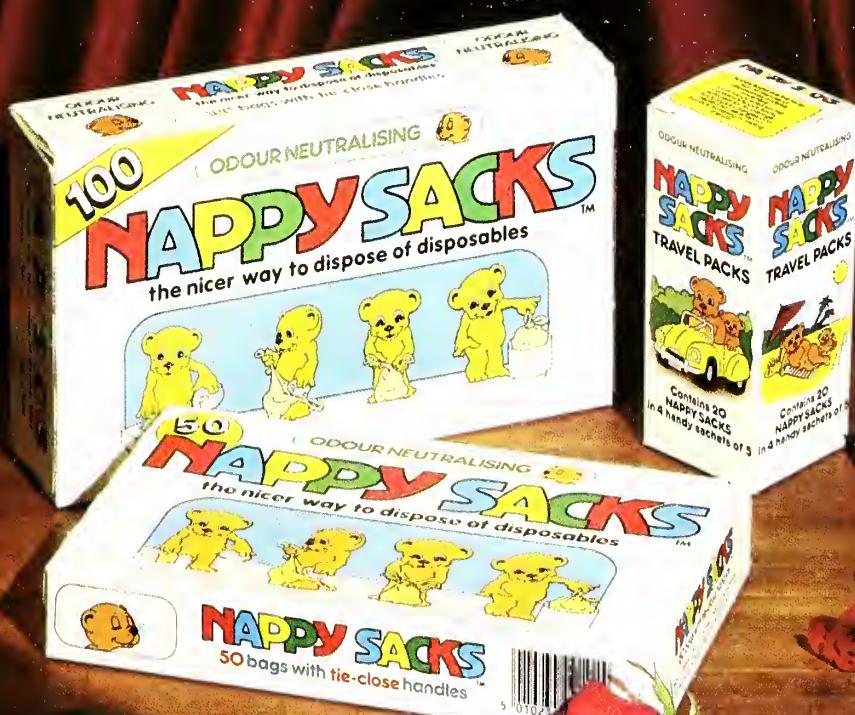
■ Council should make representations to the Department of the Environment to ensure adequate arrangements, at no cost to pharmacists, for the disposal of unwanted medicines returned by the public.

'Council of the least disliked'

A motion from Dudley and Stourbridge Branch for a voting system that allowed pharmacists to register their disapproval of certain Council candidates, prompted Roger Odd, Hull, to say such elections would ensure that winning candidates are still losers.

John Urwin, West Cumberland, said the profession would end up with a "Council of the least disliked".

Odour neutralising Nappy Sacks. The sweet smell of success.



There is only one nomination for an award in the nappy disposal category. Nappy Sacks is the clear brand leader. In its role as the odour neutraliser, the achievements of this popular British performer outshine all others. And the stage is set for another outstanding year with a

supporting cast of sampling in Bounty GiftPax, a five month advertising campaign in Mother & Baby and an autumn in-pack promotion. Be sure not to miss the Nappy Sacks range by asking for details from your Sterling Health representative or your local wholesaler.



A woman's work...

For the first time in its 149 year history the Royal Pharmaceutical Society is led by a female president and vice-president. C&D talks to Mrs Marion Rawlings and Mrs Linda Stone about their year as first and second ladies of pharmacy

Female aspirants to the top post of the profession may take heart from the knowledge, that while it took almost a 100 years for the first female incumbent to be elected, Mrs Rawlings is now the fourth female president in 43 years. So it looks as if the odds of the leader of the Society's Council being a woman are shortening.

Both Marion Rawlings and Linda Stone have always been working mothers, juggling careers in community pharmacy and service on numerous committees, with bringing up a family and running a home. Being at the forefront of the profession takes a further toll on time. Apart from travelling to the monthly Council meetings in London — Mrs Rawlings lives in South Wales and Mrs Stone in the Midlands — a lot of time is spent going around the country to Branch meetings as well as official trips abroad. All in all the support of husbands, parents, and others has been a vital link in helping them make the most of their careers and home life.

Keeping the house in order

This year, Mrs Rawlings turned her attention to the family of pharmacy with a New Year letter that appeared, to some, to admonish community pharmacists, telling them to "get their houses in order".

"The letter invited pharmacists to look at themselves and their standard of practice and, if they saw strengths to identify them, if they saw weaknesses to do something about them," explains Mrs Rawlings. "It was not, as some people thought, concerned with substandard pharmacies."

Overall standards need to be looked at, and these include involvement with continuing education to keep abreast of changes.

"Nobody is so good that they can't be better," she says.

As a profession we need to evaluate ourselves with the overall aim being to: "bring the profession into the 1990s and beyond in a state in which it will be able to respond to the demands that will be made on us", Mrs Rawlings says. The onus is on pharmacists to make themselves aware of the developments occurring in health care in order to broaden their vision.

"As a community pharmacist I know that it is very easy to be within four walls, but there is a much wider world than the pharmacy. It's up to those who want to see our profession progress to keep an eye on these wider issues, and if they are concerned, to do something about them," says Mrs Rawlings.

She calls on pharmacists to look at themselves as the public would look at them and see whether they project the image of a healthcare professional, and whether the surroundings in which they practice reflect this. They need to be able to "hold their end up" in discussions with other healthcare professionals and ensure that they are aware of developments.

The Council of the Society is working very hard to raise the perception of the profession in the eyes of the Government, says Mrs Rawlings, citing the recent undertaking of Kenneth Clarke, Secretary for Health, to redefine the definition of pharmaceutical services.

Mr Clarke has undertaken to look at that definition again and consider remuneration for services other than dispensing prescriptions. "Therefore it is up to us to prove to the Government and to the public the things we are capable of doing," says Mrs Rawlings.

The Society is also pressing the Government to make a wider range of drugs and medicines available to pharmacists to prescribe to patients.

There are a number of applications in for deregulated medicines, she adds.

"That is another aspect of my letter, that the stronger the profession, the higher the standard, the more we can argue the case that we need the remuneration in order to provide those services. The community pharmacist is providing the foundation, the base for healthcare in this country, and if that is not there the provision of health service is bound to suffer. That's why we are trying to make the case to the Government that it is essential that the community pharmacist is available in the community to provide the services."

Mrs Stone agrees that the emphasis must now change from the dispensing function to the educative role: "I believe our main role in the community is the promotion of good health and consequently the prevention of ill health and the provision of health education," she says.

Health promotion allows pharmacists to develop and enhance their role, through domiciliary visits, speaking to other health professionals, doctors, accident prevention officers and so on. As far as the profession as a whole is concerned, Mrs Stone believes that there is a need for more unity.

"Everybody wants to protect their corner"

"Everybody wants to protect their own corner, that is human nature. The PSNC deals with remuneration, the NPA deals with retail pharmacies and their owners. We [Council] have an overview of the whole profession." While it is very rare for the different factions "not to be able to agree", says Mrs Stone, "we've not always in the past been prompted by circumstances to sit down and talk."

The recent move by the MP Sir George Young to open up dispensing to all doctors and dentists has prompted a much greater dialogue between the bodies, she says. Over the past year two working parties have been set up — one on standards and the other on public relations. Both have representatives from all the major bodies in pharmacy. "The way in which we are working together is in fact the most encouraging thing that has happened during my presidency."

On the topic of communication between the Council and members of the Society — always a somewhat controversial matter — Mrs Stone says she has always tried to make Council statements more positive. Saying something positively rather than negatively "creates far fewer problems", she says. Council is now a lot better at making positive statements and highlighting benefits rather than hazards, she adds. But communication is a two-way process. Members have an onus to participate in the communicative process.

There are now five women out of 24 Council members, but about 60 per cent of entrants to schools of pharmacy are women. Some 40 per cent of registered pharmacists are women. So what can be done to improve female representation in the corridors of power?

People tend not to come to Council until their families and general careers are established which tends to rule out women until they reach their late 40s, says Mrs Stone. "The majority of women on the register are below 40 and so we can expect to see them participating more at a national level in the future." If this does happen then the chains of office may well need redesigning since they were made with suited men in mind. The vice-president agrees with Mrs Rawlings that on the days when the chains are to be worn special consideration needs to be given to one's wardrobe, to avoid snarls and snags on clothing.

Women expect to stay at work

Says Mrs Rawlings: "Younger women now expect to continue in their careers, whether on a part-time or full-time basis. They will then get to the point where they have the time for other activities, but they will have the background of a continuing career behind them, which hasn't been the case in the past."

Mrs Stone "dared to have a child after she was elected to Council" but coped through having a supportive husband, being able to manage on not very much sleep and to arrange help.

Being a woman does not particularly affect the role of president, says Mrs Rawlings. "You have to be a leader of your profession whether you are male or female. It's up to you to involve yourself as much as you can and know what's going on. On a personal level it's a tremendous advantage to have a lady vice-president, because we sort things out so well between us. But two men may do that just as well," she adds.

Mrs Rawlings encourages young women pharmacists who would like to get more involved with the profession, but feel restricted because they have a young child on their hands, to use that period to undertake research projects that they can do in their own time, for instance domiciliary visits and nursing homes.

Now 65, the president has no immediate plans to forego her pharmacy or pharmacy politics. "There is always another mountain to climb," says Mrs Rawlings. "It may not be the one marked pharmacy, but there'll be another one." A woman's work is never done.

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Overwhelming 96pc majority support conversion to Unichem plc

Unichem have overcome the major hurdle to their conversion to a public company, winning overwhelming support from members at their annual meeting, held this year at Thorpe Park. C&D reports on the day's proceedings and looks at the timetable for the company's public quotation

Unichem's annual meeting held on a sunny but blustery Sunday at Thorpe Park voted overwhelmingly for the conversion of the industrial and provident society into a public company. At the end of a good humoured meeting chaired briskly and competently (by acclamation) by outgoing chairman David Mair, members voted 2,767 to 122 in favour — a landslide 96 per cent in favour of the board's unanimous recommendation.

There was no organised opposition to conversion, and barely a dozen in the specially erected marquee voted against (the remaining "no"s were proxy votes). Only one Unichem member spoke against conversion and that was Leon Paget of Foster and Sons trading from East Dulwich, South London.

"This was one of the places Unichem was born in the 1930s," he said. "For four years from 1962 to 1966 my boss was Cecil Foster, then a director of Unichem. His father, Henry Simpson Foster, was a founder Unichem member in 1937-38."

"My opinion is that if the conversion motion is carried members will be lining their pockets but losing their society."

"I would like to see half a minutes silence for all those members lost since 1987," he said, referring to schemes introduced by Unichem to encourage higher volumes of purchasing.

However, though he won a smattering of applause and a "hear, hear" from the back of the marquee, no-one else spoke in opposition to the change.

Dissenters explain

Two pharmacists who voted against explained their decision to C&D. Richard Philp, who runs a pharmacy at Farnborough, said he thought the vote would change the whole aspect of the society. "It won't be for independent pharmacy anymore after conversion."

"No matter what the present board says Unichem is just not big enough to resist takeover. I have sent in to convert my industrial and provident society shares

because it would be foolish not to, but I am not happy about the outcome of today."

Anthony Sandles of Sandles Pharmacy in Worcester said: "I can see in 20 years time Unichem becoming a subsidiary of Boots; there is nothing to stop it now. It is a sad day and will only hasten the end of independent pharmacies."

However, these few voices of dissent could not dampen the general mood of euphoria at the result of the vote. David Mair summed up from the chair: "I do understand and appreciate that not everyone wanted this strategy, and it would have been unrealistic to expect this."

"Although like any other plc Unichem's responsibilities will be to its shareholders, in Unichem's case the vast majority of these will be you, its customers — independent pharmacists."

"Unichem will still have to meet your demands, and Unichem's performance in the City and in the market place will be judged on how well it does this. Therefore our priorities as a plc



The vote for conversion was 96 per cent — only 75 per cent of those voting needed to vote "yes" for the motion to be carried



A lone voice of opposition: Leon Paget explains to the members why conversion is not in their long term interests



David Mair (left) chaired the conversion meeting, while Peter Dodd (centre) took an uncharacteristically low-key role. Finance director Jeff Harris (right) was pleased with the unanimity of the result

Next steps

Despite the success of the Unichem conversion meeting there are further steps necessary for the process to be completed. The most important of these is the special meeting on June 8. This has to ratify the result of the conversion meeting by a simple majority.

The latest date for the return of the yellow proxy form to cast a vote at this meeting is June 6.

For those who have not yet done so, there is still time to complete and return the pink application form for conversion shares. This must be received by June 25 at the latest. June 25 is also the last day for getting in the blue application form for offer shares; this must be accompanied by a cheque for the correct amount.

If everything continues to go smoothly Unichem will cease trading as an industrial and provident society on July 1, and will begin its life as a plc on July 2.

will be much as they were as a society; to continue to do our utmost to give unparalleled service to independent pharmacists, but with a corporate structure which will place the company in a much stronger position to meet the challenges and grasp opportunities, and to strengthen commitment and support to our customers."

AGM decisions

Earlier the meeting covered the normal business of an annual meeting. The report and accounts were agreed and the interest on members' society shares for 1989 and the first six months of 1990 was agreed at 7.5 per cent.

It was also agreed that profit sharing should be set at a level of 2 per cent on qualifying purchases, plus an additional 1.5 per cent for those using approved direct ordering systems.

Three directors were re-elected to the board; Godfrey Raivid, David Liddington, and Michael Bardsley. Remuneration for the directors was set at £30,000.

Boardroom delight

Following the meeting, the mood among the current and future



Lord Rippon (left) and Michael Bardsley will bring useful European business experience to the new board

board members ranged from euphoric to sanguine. Financial director Jeff Harris was pleased with the near unanimity of the result and the positive spirit of the meeting. Chairman David Mair thought this was helped by the work of Mr Harris and others at the Unichem roadshows.

Michael Bardsley, a board member since March this year, looked forward to applying his experience of other businesses to the converted Unichem.

"I was invited onto the board through Lord Rippon," he said. "He was chairman of Dunn and Bradstreet when I was European managing director. In the end, my role will be formed by what the chief executive Peter Dodd and the chairman want from me."

Lord Rippon, who is to be chairman of the converted company, commented that such changes of status were not unusual nowadays. "I see my role

The board of Unichem

On conversion to a plc, the board of Unichem will be constituted as follows:

Lord Rippon of Hexham (aged 65) will be non-executive chairman. He is president of Invesco MIM plc and chairman of Dunn & Bradstreet (UK) Ltd, Michael Page Group plc, Robert Fraser Group Ltd and Brassey's Defence Publishers Ltd. He is also a director of Maxwell Communication Corporation plc and Groupe Bruxelles Lambert SA.

David Campbell Mair, MRPharmS (aged 54) will be non-executive deputy chairman. He is a former chairman of the National Pharmaceutical Consultative Committee and has been chairman of the society since 1985.

Peter John Dodd FCIS (aged 53) has been chief executive of the society since 1971 and will be chief executive of the company. He is a chartered secretary and worked for 16 years in industry, becoming finance director of the principal trading subsidiary of Richard Crittal Holdings Ltd before joining Unichem in 1969.

Jeffery Francis Harris BSc, FCA (aged 42) will continue as finance director of Unichem. He worked as a chartered accountant with Turquand Barton Mayhew & Co and Spicer & Peglar for 14 years. He joined Unichem Ltd as chief accountant in 1985 and was appointed to the board of the society in 1986.

William Henry Hart, MR Pharm S (aged 54) will continue as marketing director of Unichem.

Kelvin Stephen Saxby Hide, BA (aged 42) will continue as Unichem's operations director.

David Raymond Walker, MBCS, MBA (aged 44) will continue as management services director.

Michael Ambrose Bardsley, MA (aged 61) will be a non-executive director.

James Walker Buchanan, MRPharmS, (aged 54) will be a non-executive director.

as an independent chairman having regard to the interests of the customers, shareholders and executive, which I hope will coincide. There is some advantage in not having too deep an interest in pharmacy wholesaling, but I am bringing years of experience in business with me," he said.



The Thorpe Park venue made the day a family occasion for many pharmacists

Promotions record at first national show

Over 1,200 Unichem members were at Thorpe Park on Sunday for their annual meeting and first national trade show. Accompanied by non-members and family taking advantage of a day out at the theme park, the total attendance was estimated at 5,000

A 14,000 sq ft marquee provided the setting for the trade show with over 100 pharmaceutical suppliers. Members were able to take advantage of the largest range of special promotions ever offered through Unichem. One company reported orders worth £25,000, while another said orders were more than three times their average for trade shows.

Previously Unichem have held regional exhibitions linked to their branches but this experience could prompt moves for it to become an annual national event. The majority of Unichem members attending had travelled within the South East although orders were placed by customers from Leeds/Bradford, Wales and the Midlands. And a number of

Continued on page 938



Crookes sales manager John Edwards puts in a plug for Wimbledon... on the back of the company's promotion

UNICHEM TRADE SHOW

companies expressed interest in the idea that any repeat exhibition should be held in the Birmingham or Manchester area allowing more members to attend.

Unichem's marketing director, Mr Bill Hart, said the exhibition has been "very worthwhile" — all companies had reported good business. His only regret was that the strong winds had prevented the four hot air balloons from taking off!

Some companies took advantage of the trade show to unveil their new products, while others concentrated on current promotional campaigns.

English Grains Healthcare introduced a handy pack of 12 Natracalm tablets (£0.98) to encourage customer trial. The Natracalm brand is currently benefitting from a £750,000 advertising campaign with the theme "I don't take tranquillisers,

I take Natracalm".

Colman's of Norwich were busy taking discount orders for the latest extensions to the Robinsons drink range — sparkling orange barley, sparkling original orange and sparkling original lemon drinks in 330ml cans. The launch is being supported by a £4m advertising campaign this Summer.

Smith & Nephew Consumer reported great interest in their new Elastoplast hypoallergenic plasters for sensitive skin. National account manager, Mr Steve Jenkins, believes the new range will fill a niche in the market.

The redesigned packaging for Refreshers moist wipes also proved popular.

The Nomad controlled dosage system was on display at the Unichem stand. Unichem will be distributing the system when supplies are available.



TV personality Liza Goddard paid a visit to the Unichem stand to advertise the launch of Kiddi Pharmaton, the multivitamin syrup for children (C&D, May 19, p858). There she met up with chairman designate, Lord Rippon (2nd right) and brothers J.P. and H.B. (right) Manek of Dallas Chemists.



Evans Medical took Brighton Pier as their theme and complemented the flags, balloons and wheel-of-fortune by wearing period costume. Staff were on hand to distribute sticks of rock, as well as product information. Top of the list for retail marketing manager, Anthea Davies (above), was the relaunched multivitamin and supplements range with new additions garlic oil capsules and fresh royal jelly capsules (see p912)



The H.N. Norton stand proved very popular, particularly with the youngsters. Amid a host of blue and white balloons, customers were invited to fish for Norton containers each of which contained a raffle ticket. The first prize was a giant teddy bear, complete with sailors outfit



Lorna Walker of Grett Optik reported that visitors to the trade show were willing to talk as well as to buy. Grett Optik used the Unichem exhibition to launch a new 18-piece unit containing their three top selling frames in each of their six strengths of lenses. The new outer is available on special offer from Unichem in June at a trade price of £117

Two old record books from around 1900 prompted community pharmacist, Jeannette Smith, to wonder whether problems facing pharmacists today are not too dissimilar from those experienced by their predecessors at the beginning of the century

An unfortunate false alarm!

We very rarely have to send for the police, which is fortunate. They may have a divisional headquarters some 50 yards away, but they have been known to take 40 minutes to arrive.



We did call them the other day.

It's not that we don't have plenty of practice in dealing with the sad local drug addicts. The procedure is simple. Nail down everything, everything which can be slipped into a pocket, stand at the end of the counter and be visibly alert, serve them quickly, and all's well.

But this boy was different. He prowled. He picked up a few packets of cough sweets. He put them back down. He peered fixedly at the Tampax. All we got in reply to any polite offers of help was a mumble.

Betty is not easily alarmed. A couple of nights a week behind the local bar prepared her to deal with most problems. But when he finally bought a packet of Victory V gums, then went outside the door and just stood there, she began to urge us to phone the police. After all, we were about due to close, and there he stood, muttering to himself, staring, not even in the window, but through the gap between the door jamb and the door.

What were we to say? "This bloke bought a packet of sweets, and no he's just hanging around outside?" He hadn't done anything else — no attempt to shoplift, no abusive behaviour, not even the purchase of a "set of 1mls". We felt foolish, but we phoned. It was a pretty sheepish phone call, and the young constable who arrived was greeted with apologies, especially since he had arrived so promptly.

He laughed at us: Although I have to give him his due, he laughed at us without a sneer. "It's no problem", he said with his ear against his walkie-talkie. "Don't let it worry you."

We went on explaining in a disorganised quartet. He went on listening to his walkie-

talkie. Then he stowed it back in his pocket and grinned at us. "My poor mate's getting a right ear-bashing — all about the Lord — you know Jesus and that. We met him as we came in, so he's out there spouting all about the risen Lord. Thought we knew him. Born again, he is — not that it looks like it's done much for him."

Now we felt really silly. All our combined experience of dealing with drunks and drug addicts, and we had been scared by a religious freak into calling the police.

But I ask you, if you had a weird creature loitering just outside the door when you were coming up to closing time, what would you have done?

Once upon a time when I managed a Timothy White's...

Once upon a time, when the children were young, when I was young, and even the dog had just had six pups, I was managing a branch for Timothy Whites, as was. There was a major refit which meant we spent several weeks in chaos. Even the ceilings were stripped far enough back to see the original reeds which had been used to stuff the space between the joists.

Along with the dry-rot infested rubble, any dead stock was weeded out for disposal. To my surprise I found something interesting in the skip — something worth rescuing and keeping. I still have them — two old books — smelling of dusty age.

The first time I tried to read them, it was from a pharmaceutical point of view: What kind of dispensing went on around 1900? What did they sell then?

Alarming reading

The prescription book makes alarming reading. Some of the ingredients are either illegible or unknown, but there seems to be a horrifying amount of heavy metal involved; and most of the "tonics" are laced with a small dose of poison of some kind — strychnine and arsenic usually.

Then some of the regulars began to jump off the page. There's the Rev Alderson, always having trouble with his throat. He seems to have lived with his unmarried sister, who suffered from chronic constipation, for which she received aperients, probably only a few degrees less violent than the horse balls she bought for the ancient bony nag on which she rode to hounds.

You will, of course, realise that I have no proof for my estimation of her horse — nor for my picture of the lady and the horse as a matching pair.

And here, in the day book, under the Latin heading, we have the local nobility. The Earl of S. manages to appear under seven different headings: stable, stud, butler, nursery (even there they were not spared the grey powders), house, etc. Protocol had to be observed strictly; "Mrs Jebb, the Manor" is on a separate line from "the baby" and "the third housemaid".

And there behind his counter, stood Mr Bradshaw the chemist. Had he graduated to a white coat by then? He was still selling lots of goods which would now be classed as hardware — lamp glasses, wicks and lamp oil, whitewash and black lead. What a tightrope he must have had to walk! On the one hand, the

nobility and its minions, on the other the local peasants — I'd be prepared to bet on his polite condescension when they were asking for his advice. I can nearly picture him, bowing to the gentry, and adjusting his deference to suit each customer's place in the hierarchy. I can see him in his dispensary, mixing up the mixtures with their evil-tasting tinctures. It all seems very approximate. All these natural remedies so beloved of herbalists may have been prepared from things which happened to grow, but many of them were none the less lethal for all that.

Even then the chemist had his share of responsibility. Even then he would have problems with his professional image: a tradesman, but practising a skill peculiar to himself. If he carried on his business with any degree of panache he must have been a cut above the other shopkeepers. But how did he reconcile the whitewash with the mixture for the Reverend gentleman's cough? Did he write pained letters to C&D about his lot?

Plus ca change, plus c'est la même chose.



BUSINESS NEWS

Co-op shows sales up 17pc

A £2.7m programme of developments and acquisitions has contributed towards the 17 per cent increase in sales for National Co-operative Chemists Ltd. Sales for the organisation have increased from £40.7m for the year ending January 1989 to £47.5m this year.

Sales up 17pc to £47.5m

Gross profits up 22.5pc to £12.4m

Trading surplus up 80pc to £2.25m

Retained surplus up 54pc to £1.37m

Gross profits have risen from just over £10m to £12.4m, and the group's retained surplus after taxation has jumped 54 per cent, from £889,000 to £1.37m; this sum has been transferred to the group's reserves.

The annual report of the NCC shows a record trading surplus, which increased by £1m to £2.25m; however this included a one-off payment from the Department of Health owing from previous years for NHS dispensing.

Expansion of NCC in 1989 has included the purchase of a group of seven private businesses in West Yorkshire, three in Wigan, two in Walsall, and single units in Belfast, Manchester and Swanley, Kent. A new pharmacy was opened in the Co-operative Wholesale System store in Inverness.

However branches in Clydach, Southsea, Finaghy and Walsall were closed, due to trading circumstances, says the annual report. NCC currently have 166 outlets.

Cow & Gate gave assurance this week that they were confident beef used in their babyfoods carried no risk of bovine spongiform encephalopathy. Babyfoods manufacturers generally bought their ingredients from carefully selected sources and slaughter of animals was rigorously supervised, they said. Cow & Gate had never used the nervous tissue and other offal that was now banned.

Countercall bring in the receivers

Countercall, the Birmingham based pharmacy brokers and distributors, are in the hands of the receivers. Sixteen of the workforce have been made redundant leaving a team of one national accounts manager and three representatives to keep the business in operation.

Tony Saunders, manager for administrative receivers Grant Thornton says that Countercall managing director Ivan Robinson and sales director Mike Chambers are still directors of the company.

"We are hoping to continue trading and sell the business as a going concern," said Mr Saunders. "We have not set a time limit on this; it depends how much interest is shown in the business."

"We intend to try and complete existing orders, and as far as we know the company's clients are continuing to support the receivers." He said the problems faced by Countercall revolved around the lack of turnover since the Christmas period. "The first half of the year was disappointing in terms of throughput, and this has put a strain on the cashflow."

Julian Jones, a director of Nirvana Products, which are distributed through Countercall said: "We are still trying to find out more information but it makes sense to give the receivers a bit of support. Countercall owe us money, and if everyone pulls the plug everyone loses." Mr Saunders for the receivers said that it was too early to say what payments the creditors would get.

Cedar Health, are still distributing through Countercall "for the present".

A spokesman for Agfa said the company was still in discussion with Countercall's receivers but expect to have a policy in place by Tuesday. In the mean time customers should ring Agfa direct in the first instance and the company will arrange deliveries.

General sales manager for

Braun (UK) John Merrett said: "We shall continue to trade through Countercall; they fulfill a need in the industry. They have done an excellent job for us in the past and we would like to see them successfully move through receivership."

However, UK marketing manager for Mates Healthcare, Chris Bell commented: "We were sorry to hear the news of Countercall's receivership, which was a surprise for us. However, we welcome this opportunity to get closer to some of our customers in the pharmacy sector by servicing them direct. We will be looking at various options and are talking to both wholesalers and pharmacy chains."

Allergan's Gordon Jones says the company is aware Countercall is in receivership, but are continuing to trade through the receiver at present. "They have done an excellent job for us over past months," he said. Pharmacists with orders outstanding through Countercall will have them honoured.

The Government is likely to reduce the two year qualifying period for VAT relief on written-off debts announced in this year's budget. Mr Richard Ryder, Economics Secretary to the Treasury, said in the Commons last week that the Government is considering introducing an amendment providing for a shorter period during the Finance Bill's report stage.

Nordisk have moved to Novo Nordisk House, Broadfield Park, Brighton Road, Pease Pottage, Crawley, West Sussex, RH11 9RT. Tel: 0293 613555.

Shermond Surgical Supply Ltd, suppliers of disposables and medical/surgical sundries are moving to new premises from June 18. The new address will be: Units D1 and D2, Meridian Industrial Estate, Newton Road, Peacehaven, East Sussex, BN10 8JQ. Tel: 0273 588577.

Polychem buy Rusco from Booker

Polychem Ltd have acquired Rusco Pharmaceuticals Ltd from Booker Nutritional Products, with effect from May 21. Established in 1950, Rusco became part of the Booker group when Kingswood Chemists acquired the Russell chain of pharmacies and its manufacturing facility, in 1974.

Polychem distributes the Rima range of antibiotics, tablets and capsules from its marketing offices in Croydon, which will now relocate to Rusco's present manufacturing facility in Biggleswade. The Rusco range comprises primarily liquids, ointments, powders and creams, and the amalgamation of the two ranges will enable Polychem to offer an extensive range of over 120 licensed products in the UK market, the company says. Invoicing and physical distribution of the joint range will be handled on an ex-stock basis from Rusco's site in Biggleswade.

Rusco's existing management team with Mr D. White as the site manager will remain in place and Mr R. P. Easto has been appointed as director.

R&D outfit

A company specialising in contract research and development, and consultancy for the pharmaceutical industry has been launched. Numed Research and Development Ltd will be based at Trinity College, Dublin.

Numed intend to assess and design state of the art drug delivery systems, and are employing a team approach involving doctors, pharmacists and other scientific personnel.

The company says it has wide experience of product registration work, and has been associated with submissions to the National Drugs Advisory Board, the DHSS, and other regulatory bodies.



Lloyds Chemists, which has grown to be the second largest pharmacy chain behind Boots and the second largest drugstore chain behind Superdrug, have opened their 500th store in New Waltham, near Grimsby. The picture shows Allen Lloyd, the group's chairman and managing director, in front of his first shop in Polesworth which he opened in 1973

Proteus prepares ground for USM flotation

A company which claims to have its own AIDS vaccine well along the pipeline are making a rights issue on the USM.

Proteus International are a computer software company specialising in the molecular design of proteins involved in the development of new pharmaceuticals. Potentially the work could halve the costs and lead times of developing a new pharmaceutical product.

The company's primary product is its Prometheus software. This is said to be capable of designing receptor shapes in a matter of months whereas established crystallography techniques, which involve crystallising proteins then eliminating unsuitable variants by experimentation, normally take years. Because of its sophisticated nature Prometheus takes a vast amount of computer power, and has to be run on Cray supercomputers capable of two billion calculations a second.

Proteus' managing director John Pool emphasises that this is not just "a boffin's ego trip" but a practical commercial system. "The average scientist does not like using big computers, so we have produced a programme which allows all the sophisticated activity to take place at the number-crunching level inside the Cray supercomputer. The scientist is only faced with a user-friendly IBM workstation."

The software alone costs £500,000 and for the present Proteus are operating a three tier strategy; the first is the outright sale of Prometheus, the second research services on a contractual basis targeted at the band of pharmaceutical companies below those with the purchasing power

for the system. The company is also developing its own proprietary products.

Proteus have tackled high profile problems to highlight the efficacy of their product. This has led them to look at AIDS vaccines, steroid dependant tumour vaccines, and BSE.

The AIDS research is already taking shape. John Pool says in a matter of weeks Prometheus came out with ten sets of empirical formulae and that six of these produced AIDS antibodies in sheep when tested by Proteus' venture partners in Australia, Peptide Technologies. More exciting still, says Mr Pool, is that when experiments were performed on primate cells the formulations had the additional effect of stopping the transfer of the AIDS virus from one cell to another eight times more effectively than AZT. He said Johnson & Johnson have plans to test the drugs on primates.

The company is apparently also making progress on designing drugs for steroid dependent cancers. They are not yet prepared to comment about the BSE research.

The company has already interested such big pharmaceutical operations as Merck Sharp & Dohme, who have commissioned Proteus to design one of their strategic drugs for the next decade.

To raise more capital the company is engaging in a rights issue on the USM. Some 5,373,333 ordinary shares of 2p each at 84p a share are to be issued to raise £4.19m. At the placing price the capitalisation of Proteus is £18.05m and the new shares represent 25 per cent of the enlarged share capital.

CTPA confirm stand on animal tests

The Cosmetic, Toiletry and Perfumery Association has reaffirmed industry commitment to the elimination of animal testing and says it shares public concern about the use of animals in the safety assessment of its products.

"But it won't happen overnight," CTPA chairman John Sharpe told guests at their annual



John Sharpe, CTPA chairman

dinner last week. "Suitable, effective, alternative test methods still have to be validated. But good progress is being made and we are pleased to be co-operating with several of the animal welfare organisations in this vitally important task.

"The situation with regard to environmental issues is complex and still developing — new legislation is on the statute books, codes of practice are being discussed, eco-labelling schemes are in the pipe-line — so I suggest that it would be wise to resist the temptation of taking short term advantages," said Mr Sharpe. "Jumping hastily onto the green band wagon is no substitute for

thoroughly researched strategies and can do the industry more harm than good."

Turning to the updating of the 1976 EC Cosmetics Directive, Mr Sharpe said the CTPA is in favour of its principles — namely ensuring the safety of products for the consumer and the removal of existing barriers to trade. "But we are still unhappy about some of the measures being proposed by the European Commission. They seem to us unnecessarily bureaucratic and carry the risk of stifling innovation."

He said the single European market represented an extended home market rather than an expanded export one. There were also opportunities unfolding in Eastern Europe.

Last year the industry's overall balance of payments surplus amounted to £236m, a down turn of 7 per cent compared with 1988, but with exports worldwide and to the EEC each increasing by around 5 per cent.

MP Sir Dudley Smith, responding on behalf of the guests, said the industry should grasp the openings for trade now coming from Eastern Europe. He complimented the industry on the lead it had taken on CFCs.

■ Creighton's Naturally plc, this week resigned from the CTPA following the annual dinner. Says chairman and managing director Richard Collard: "For some years we have fought hard within the CTPA, lobbying for this group to back a total ban on animal testing for cosmetics and toiletries. The CTPA's current position calls for the 'ultimate elimination' of animal testing. In my opinion this is less than satisfactory. I consider that we need to achieve the elimination of animal testing sooner rather than later. We urge the EC to ban animal testing now, which we believe coincides with the UK consumers' demands."

Smithkline Beecham consumer brands have announced a £5.2m investment to expand their output of ready-to-drink, one-shot cartons of Ribena, Shloer and C-Vit from their Royal Forest factory at Coleford, Gloucestershire. This follows the £12m expansion plans announced for the factory since August last year.

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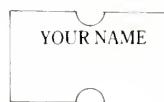
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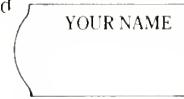
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ABOUT PEOPLE



Marion Rawlings with Gold Medal winner John Stenlake

APPOINTMENTS

Mawdsleys Brooks & Co Ltd have appointed: Alan Backhouse as sales manager; Neil Topping as Northern business development executive; Nigel Worthington as Southern business development executive; and Debbie Green as customer support executive.

Whitehall Laboratories have appointed Frank Lodge as sales training manager.

Smith & Nephew plc have appointed Eric Kinder as chairman; he was previously deputy chairman. This follows the retirement on May 15 of Kenneth R. Kemp, who now becomes honorary life president.

Pharmaceutical Services Negotiating Committee: David Plumb has been appointed chairman of the PR subcommittee.

ADVANCE INFORMATION

United Kingdom Clinical Pharmacy Association/3m Riker Award Day Computer Assisted Learning, at 3M House, Morley Street, Loughborough, on June 20. Delegates are encouraged to bring examples of their own developments for the Practice Interchange session. Facilities for demonstration are available between 12.45-2.15pm. Registration fee is £10 (UKCPA members), and £20 (non-members). For details, contact Mrs P. Kennedy, 73 Aylestone Road, Leicester LE2 7LL.

West Metropolitan Branch, RPSGB. Visit to Kew Gardens and the Sir Joseph Banks building on June 14, at 7pm (meet outside main gate at Kew). Guided tour will start at 7.15pm. Cost £2, plus the normal admission of £1 (£0.50 for students and OAPs). Either send a cheque for £2 to Irene Harris at 714 Chelsea Cloisters, Sloane Avenue, London SW3 3EW, or for details contact her on 071-589 3723.

Pharmaceutical Marketing Society, "Meeting the challenge of practice formularies", a symposium at

the Royal Pharmaceutical Society, 1 Lambeth High Street, on June 15 at 9.15am. Will include a talk on PACT, by Dr Barry Strickland-Hodge, director, MITT. Fee £51.75 (members), and £66.70 (non members). For details and to register, contact Mrs Vivien Bennett, on 0403 64898.

Agricultural and Veterinary Pharmacists Group. Visit to Animal Health Trust, Newmarket, Suffolk, on June 27. Lunch £12 (cheques payable to RPSGB). For details, contact Mr W.B. Rhodes before June 15 on 071-735 9141.

CPP chain for chairman

The AGM of the College of Pharmacy Practice was marked with the presentation of a badge of office to the chairman Alan Crabbe by the Manchester, Salford & Trafford Branch of the Society in memory of Harry Steinman, the former president of the Society,

Stenlake takes Society's Charter Gold Medal

Professor John Stenlake of the University of Strathclyde has been awarded the Royal Pharmaceutical Society's Charter Gold Medal for his "outstanding service to the Society in promoting the interests of pharmacy and the pharmaceutical sciences".

President Marion Rawlings, making the presentation, told the annual meeting that in such a distinguished career it was difficult sometimes to single out the greatest claim to fame. "In Professor Stenlake's case, however, I think this must surely be his contribution to the design and synthesis of atracurium besylate, which was developed in collaboration with the Wellcome Foundation." They received the Queen's Award for Technology in 1986 for the product's discovery and development.

Professor Stenlake was awarded a Fellowship of the Royal Society of Edinburgh in 1964, the Harrison Memorial Medal for distinction in the science of pharmacy in 1974, the CBE in 1985 for his contribution to the quality assurance and control of drugs and medicines, and the Royal Society's Mullard Award for outstanding contribution to the advancement of science in 1986.

Mrs Rawlings also outlined Professor Stenlake's service to the BP Commission, the Committee on Safety of Medicines and the Medicines Commission.

former chairman of the National Pharmaceutical Union (as it then was) and former chairman of the Central Chemist Contractors Committee (now PSNC). The chain features links in the shape of the CPP's emblem, the benzene ring.

The president awarded the Charter Silver Medal to Dr John Foy, someone "who has done so much, not only for undergraduate and postgraduate education, but for the continuing education of practising pharmacists."

Until his retirement this year, Dr Foy had been responsible for organising the teaching of applied pharmacology to undergraduates, as senior lecturer at Bradford University and had published about 60 papers. He was a founder director of the educational technology service and from 1978 to 1984 was chairman of the postgraduate School of Pharmacy at Bradford.

However, Dr Foy also had used his expertise in educational technology for the benefit of many colleagues throughout this country and overseas. For 17 years he had served as a member of the Society's Audio Visual Aids Committee and he had made an outstanding contribution to the Recorded Lecture Service.

Pharmacist makes mayor

The new mayor of Bromley, Kent, is pharmacist Councillor Jennifer Hillier.

She has served on the council for 16 years and represents the Conservatives in Farnborough ward. She has spent most of her life living in Bromley borough and works part-time as a pharmacist at Farnborough Hospital.

Mrs Hillier qualified at Chelsea College, London, and worked in community pharmacy for about eight years before getting married and having children.

She told C&D she was looking forward to her year in office, which will involve about 700 engagements.

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CHEMIST & DRUGGIST PUBLICATION FOR PHARMACY ASSISTANTS

JUNE 1990

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The weather over the May Day Bank Holiday is anything to go by, are in for another smashing summer. Remember last year? early hot spell at the beginning May gave way to a quieter period before the Summer really started in late June.

To help you get ready for the influx of holidaying customers we've a couple of special features this month. The emphasis for the summer is very definitely on safe tanning, so match complexions to factors on page 4. And check how to tone up pasty and tired legs, hidden by thick tights this winter, with our guide on page 20.

Look out too for the concluding half of our short series on infant feeding with how to introduce babies onto solids on page 22. On offer too this month are competitions, from Crookes on page 13 and English Grains on page 29. Good luck!



*Editor: Hawaiian Tropic Tanning
Researchers at work in the sun. Safe
tanning, p4*

OVER THE counter

A CHEMIST & DRUGGIST PUBLICATION FOR PHARMACY ASSISTANTS

VOLUME 2 NUMBER 18 JUNE 1990

Contents

4

BEAUTY BASICS ON SUNCARE

With both health and fashion experts recommending a lighter shade of brown for the '90s, we look at safe tanning

8

FOCUS... INFANT FEEDING, PART TWO

Health visitor Joan Ewart describes the weaning process, and suggests a simple schedule

14

SHOPTALK

This month includes a Factfile on world health, gives you some ideas for tea break, and reports on a Merseyside initiative

20

SUMMER LEGS

After a Winter under wraps, legs need a little looking after to get them into tip top shape for the beach

22

TRAVELLING CHECK LIST

Help your customers remember what they might need on holiday with our handy list of pharmacy essentials for the travel bag

24

OTC MEDICINES LIST, PART SIX

Remedies for travel sickness, oral hygiene problems and cystitis complete the first half of this year's 12-part guide

30

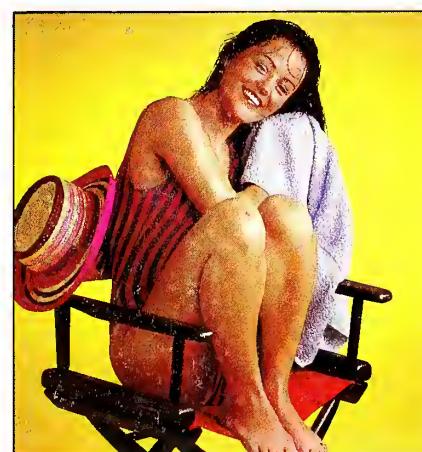
PAST MONTH IN REVIEW

Four pages of new products this month, showing you what's soon to be new on-shelf

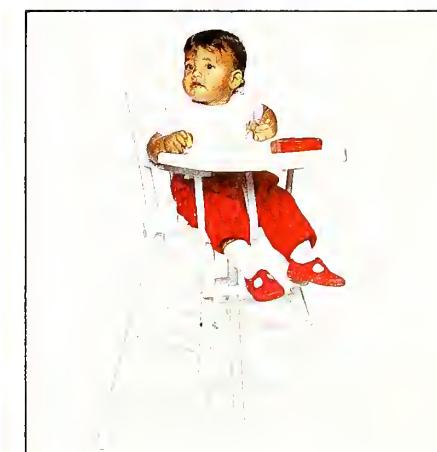
35

COUNTERVIEW

The early spell of hot weather has had Verity reaching for the sunpreps... and the film processing envelopes



Beauty Basics, p4



The right time for solids, p8

BEAUTY BASICS



Tanning tips at a glance

- 1 Take every precaution to avoid sunburn, especially in the cases of babies and children
- 2 Avoid intense midday sun between 11am and 2pm
- 3 If you want a tan, build up sun exposure gradually
- 4 UV light reflected off the ground increases the amount received. Even in the shade, reflection of UV rays can expose you to up to 50 per cent of the ambient radiation
- 5 Water does not protect against UV which can penetrate up to a metre deep
- 6 Anyone on photosensitising medication should be warned to avoid the sun, or wear a good sunscreen if exposure is unavoidable



Having fun in the sun this year doesn't mean frying like a lobster. Both health and fashion experts are recommending a lighter shade of brown for the nineties and it's up to you to show your customer the importance of safe tanning.

No matter how hard health experts push us, no-one nowadays wants to be pale and interesting. The dangers of too much sun are clear, but there's no doubt about it, people look and feel better browner. If we can't be persuaded to stay out of the sun, then we must be persuaded to take care. This is where your advice is crucial — it's your job to help educate the public towards safer regimes for bronzing without burning.

Wise up to the dangers

Fortunately, fashion and beauty experts are doing their bit, promoting light brown as "de rigueur" this Summer, but there will always be some consumers simply "dying to get a tan" risking sunburn, heat stroke and at worst, skin cancer. It seems that we'll never be persuaded to pale into significance, so instead we must wise up to the dangers of too much sun.

The array of creams, lotions and oils for sun protection can be bewildering for the consumer and often can confuse their choice. More than likely, they will ask you or the pharmacist for advice, so swot up on your factors and learn how to recognise skin types.

Talking over tans

Ever wondered exactly how your skin changes colour in the sun? It's a complicated process. Basically, the sun emits three kinds of rays relevant to tanning — ultra violet A, ultraviolet B and ultraviolet C. Only UVA and UVB rays reach our skin. The UVA rays are usually acknowledged as the longer tanning rays and the UVB as the shorter, burning ones.

A tan is the stimulation of the production of melanin following an attack by these rays on the skin. Once melanin is activated it is distributed throughout the skin to act as a defence against further attack. The more

melanin a person has, the easier it is for them to tan. The life span of a tan is the amount of time it takes the melanin in the lowest levels of the skin to rise to the top — usually about a month. The depth of a tan however depends on the amount of pigment that your skin can produce. When the pigment is fully developed, the skin will not get any darker and subsequent sensible exposure will simply serve as a top up.

Suntan products are designed to slow down the effects of the sun's rays giving the skin time to activate melanin without the side effects of blistering and peeling. They also help to minimise any long term damage.

Getting under the skin

Skin can basically be divided up into several categories or types. It is up to you to recognise your customer's skin type so that you can recommend a suitable protection factor. A quick look at our list below will help you to recognise skin types at a glance.

- **Irish/Scottish complexion:** Very fair, usually associated with red hair and freckles. This type of skin burns easily and very rarely achieves a satisfactory sun tan. A maximum protection factor is *essential* here.

- **English:** A pale skin with blue or hazel eyes typifies the English rose. Again, tanning is difficult and burning and peeling usually occur. A high protection factor should be used on the face (15) and at least an 8 on the body. A tan will develop eventually if skin is treated properly.

- **Scandinavian:** The skin is pale and the hair is usually blonde. Skin tans easily although it can sometimes burn slightly initially. A moderate protection factor is sufficient here with a slightly higher one on the face.

- **Mediterranean:** An olive coloured complexion that tans easily, and rarely burns or peels. Begin with a factor 6 and then reduce to a 4.

- **Caribbean/African:** Rarely burns or peels but this does not mean that SPFs are not needed. This skin will certainly burn without some degree of protection.

Some facts on factors

Frankly, factors are confusing! Unfortunately manufacturers determine sun protection factors in different ways so one company's factor 4 will not necessarily be identical to another. If you're confused, imagine how the consumer feels! The safest way to advise is to use our skin type list and then study the packs to see what factor they recommend for particular skins.

Consumers are constantly labouring under the misapprehension that using a higher factor means that they won't get a

Just for the kids

Kiddies' skins are very sensitive and they should always be protected with sunhats and generous applications of high factors. Recommend specific products for children — most manufacturers produce them nowadays. Remember, one or two episodes of blistering sunburn in childhood can double the chances of melanoma in later life.

suntan. This simply isn't true — high protection factors do not prevent colour developing, but they do prevent burning and peeling and help to minimise long term damage. Admittedly, a tan will take longer to develop but it will certainly be safer and chances are it will last longer too.

As a basic guide, work on the assumption that low protection factors range from 0-4; moderate from 6-10 and maximum above 12. Choosing the right factor is crucial and suntan products containing UVA and UVB screens should always be opted for in preference to UVA-only screens.

Covering up the essentials

Different parts of the body require different levels of protection in the sun and what is adequate protection for the body is certainly not suitable for the face. Often several products are required. Persuade customers that these purchases are worthwhile — skimping on sun preps spells disaster!

No more face ache

When it comes to sensible suncare, the face is the most important consideration. Facial skin is the first area to show signs of premature ageing as it is exposed to the elements all year round. Some experts say that the best protection for the face is to keep it out of the sun altogether. If you think this is a bit extreme, turn instead to some of the face-only products currently on the market.

The best advice you can give is to persuade consumers to use a high level protector for the face and to always wear a hat in the sun. Protection should be reapplied frequently, especially on the nose where there is little fat. In some climates, a total block for the nose is advisable.

Skin around the eyes and the thin skin of the eye lid are particularly vulnerable, so remember to wear sun glasses — these are usually a better idea than using cream, which should not be applied too closely to the eyes. Lips are also sensitive — recommend a lip salve for sun dried lips and a total sunblock to be on the safe side.

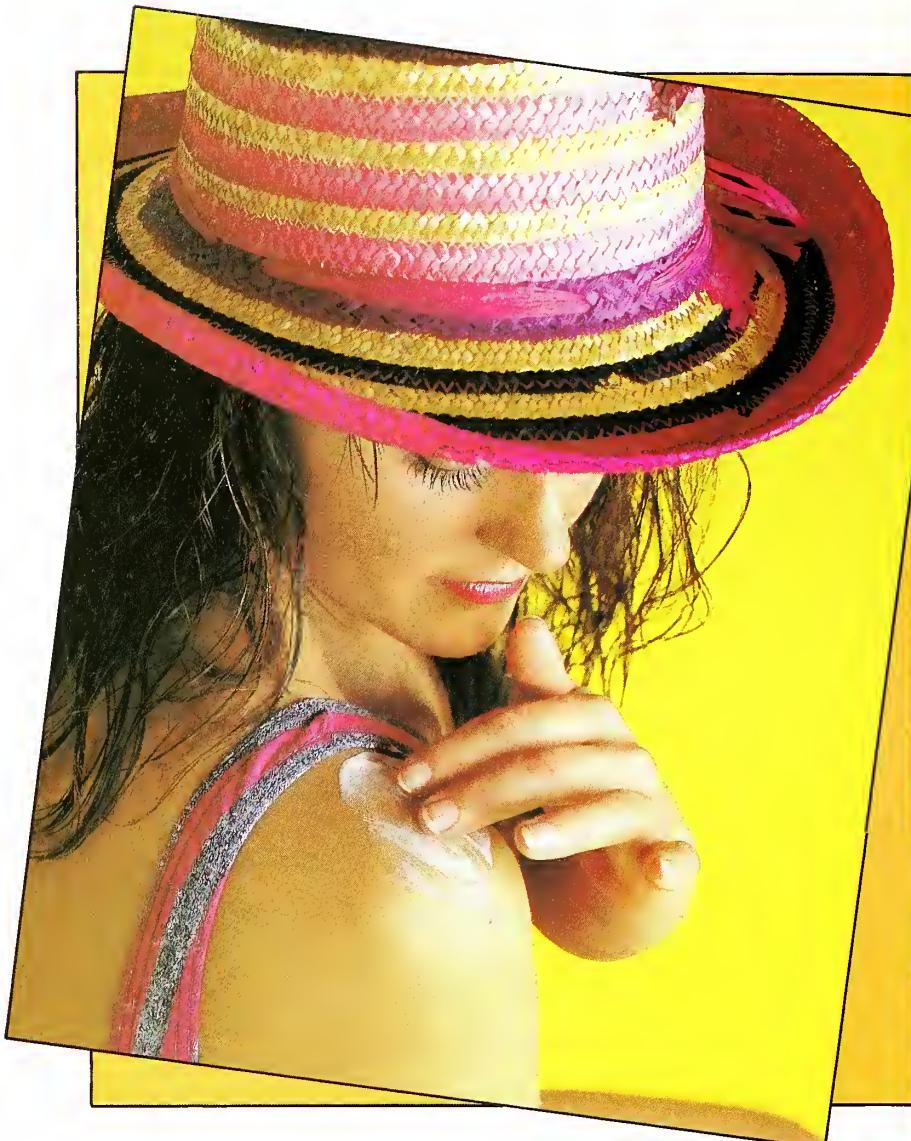
Keeping your face under the shade of a parasol is not necessarily the answer. Some of the sun's rays can be conducted through material and research has shown that 50 per cent of UV light can penetrate an average beach umbrella; 30-50 per cent can get through cloud and 20-40 per cent through a wet T-shirt.

Keeping the body beautiful

In the cool English climate, our bodies are very rarely exposed to the elements. The body remains covered up far more than the face and so is less likely to suffer long term damaging effects. Those who are fair-skinned should still use a moderate to high protection factor on the body especially on the delicate parts such as the shoulders.

In fact some parts of the body are more vulnerable than others to damage. The boney bits suffer most due to a lack of protective fat — shins and collar bones can suffer agonising burns. The most vulnerable parts are those that are always covered up such as nipples, breasts or bottoms — a high protection factor should always be used on these.

It is advisable to always opt for waterproof products, but if this is not possible then cream or lotion should be reapplied liberally and often. Don't forget to



pay particular attention to the sole of the feet — they are so often forgotten and burns here will really ruin your hols!

Happy ever after

Looking after the skin after a day in the sun is just as important as caring for it in the sun. Follow up care is essential to keep the skin in good condition.

The first step in after-sun care is to rinse all salt deposits from the skin. Water chemicals, wind and sun all strip the skin of vital moisture. After rinsing, a cooling remoisturiser should be added to the face and body to prevent the skin from drying out. Most after suns contain either lanolin, cocoa butter, aloe vera or glycerine.

Remember however that aftersun won't work miracles — if the skin is already burnt, nothing will prevent it from peeling — the aftersun simply helps to return suppleness to burnt skin. The full life span of a tan is around a month so aftersun care should be more than just a quick tonic after over-exposure. If you want to keep your skin healthy and supple a remoisturising routine should be followed regularly for about a month after returning from a holiday.

Burn up

Quite simply, sunburn is agony and you should always consult your pharmacist

before recommending any treatment. Treating sunburn means cooling and soothing the skin to prevent blisters, if burst, becoming infected. Spray on treatments are easy to use and minimise pain on application.

Mild sunburn is best treated with a cooling aftersun; calamine lotion is also a favourite although it does turn you bright pink! The pain of more severe cases can be soothed with a preparation containing a local anaesthetic eg benzocaine or, if the skin is not broken, topical antihistamines are often recommended. Blisters should not be broken as this can lead to infection.

Anyone suffering from sunburn should drink lots of water and take cool showers to soothe the skin. It is also said that cold tea and natural yoghurt are great for soothing mild sunburn. However, the best way to deal with sunburn is to prevent it in the first place with adequate protection and sensible exposure — there is no need to burn.

Happy hols!

With all of this advice at your finger tips there is no need to spoil your fun in the sun and there is certainly no need to suffer the long term effects of needless and excessive exposure. The message is to be sensible and go the lighter shade of brown — it's far more flattering and safer too!

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8 BRANDS



62% £*

1 BRAND

A N S W E R

- Bonjela provides up to 4 hours pain relief per application and can therefore provide up to 24 hours pain relief in 6 doses.¹⁻⁴
- Bonjela has an anti-inflammatory action that will reduce the inflammation of the gums.⁵⁻⁷

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JAN-FEB 1990 PHARMACIES

Weaning ways

Health visitor Joan Ewart looks at how to take a baby off milk and onto solids



The aim of weaning is to enable an infant to become less nutritionally dependent on milk and to enable him to participate ultimately in family meals.

Calorie requirements vary with age. Infants between four and nine months require 110 calories per kg; and between ten and 12 months they need 100 calories per kg. For the first four to six months of life, milk, water and vitamin supplements provide an infant with all his nutritional needs. A mixed diet should be started when these needs are no longer satisfied with milk.

Parents should begin to think about weaning when the infant shows obvious signs of hunger after feeds; demands feeds more frequently; or when a baby who initially sleeps through the night starts waking up at night. Weaning usually starts between four and six months of age but this varies from one child to the next. It is inadvisable to commence weaning before three months as the early introduction of solids increases the risk of allergy.

Weaning usually begins with a gluten-free baby rice cereal. Wheat-based cereals should be avoided before the age of six months since wheat may precipitate the onset of coeliac disease in a small percentage of susceptible infants. Other foods which may be used are fruits — stewed pears, apples and banana mashed with milk, and vegetables e.g. potatoes, carrots, swedes etc. 'Solids' should never be added to baby's feeding bottle, but given on a spoon. Weaning can commence at any time during the day depending on baby's needs.

In order to establish the acceptance of a wide variety of flavours, it is important to vary the flavour of foods offered. If a particular food is rejected, another should be given, and the rejected food offered a few days later.

Between three and six months, a liquidiser or sieve should be used to puree fruits, vegetables and meat. Red meat, liver and egg yolk are rich sources of iron. These foods are important ingredients in the infant's diet, since the amount of iron in human milk and unmodified cow's milk is minimal and the infant's iron reserve is depleted after the age of four months. Hard boiled eggs, cooked for seven minutes, can be given from six months.

At six months lumpy foods should be introduced. At this age, the skill of chewing is being developed. If chewing is delayed during

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*Independent Research Data, 1989.



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this critical period, the skill is lost. Chewing also develops the muscles of the jaws which enhances the development of speech.

Between six and seven months, finger foods should be added eg pieces of wholemeal toast, chipatis, carrots and apples (peeled and cored). Infants should never be left unattended with these foods because of the risk of choking.

Between nine and 12 months the infant should be participating in family meals.

Types of foods

Infants can be weaned either on family foods or commercial brand foods, depending on the family circumstances, customs and culture. Family foods should be prepared for babies without the addition of spices, salt and sugar. Salt and sugar are acquired tastes and are not needed. There is a certain amount of natural salt and sugar in foods anyway.

Sugar is usually added to commercial brand foods and is necessary for their preservation. It is usually listed as glucose, lactose,

fructose, sucrose and maltose. Extra sugar added to food encourages a "sweet tooth", causes dental caries and obesity.

Added salt causes an excess of sodium in the blood, and puts stress on the young kidneys. Salt may be a contributory factor to hypertension later in life, therefore, the restriction of salt intake in infancy is beneficial.

Babies can be weaned on a vegetarian diet provided it contains an adequate amount of energy, protein and iron. In some Asian families, where family foods are considered unsuitable, or where weaning is delayed beyond the recommended age, there is a risk of iron deficiency anaemia. Where these children are kept indoors a lot, and wear clothing which covers their arms and legs, they are deprived of sunlight on the skin. This prevents the manufacture of vitamin D; deficiency over a long period results in rickets. In these circumstances, weaning foods and vitamin supplements should be encouraged.

Commercial brand foods play an important role in weaning infants. They are fortified with vitamins and iron, and contain proteins, fats

and carbohydrates to provide a balanced diet for the infants. They are particularly useful in the initial stages when only a small amount of bland food is required. They can be a useful standby where family foods are preferred.

Powdered foods are advantageous in that they are easily reconstituted according to the manufacturers instructions. Only the required amount is prepared and waste is minimal, making these products economical. When tins and jars are used any remaining foods must be refrigerated and consumed within 24 hours.

All "sell by" dates must be closely adhered to.

Milk

As the solid intake increases, the volume of milk the child consumes decreases. By the age of one year, milk is still an important part of the child's diet and provides about 40 per cent of the calorie intake. Semi-skimmed milk could gradually be introduced from two years provided the child has a varied diet, and skimmed milk could be given from five years.

SUGGESTED WEANING SCHEDULE

	4 months	4½ months	4¾ months	5-6 months
Early morning	Breast feed or bottle	Breast feed or bottle	Breast feed or bottle	Breast feed or bottle
Breakfast	1-2 teaspoons baby rice cereal Breast feed or bottle	1 teaspoon baby rice cereal Breast feed or bottle	1-2 teaspoons baby rice cereal Breast or bottle	Cereal or porridge Breast milk or bottle
Lunch	Breast feed or bottle	1-2 teaspoon vegetable or commercial brand vegetable Breast or bottle	Pureed meat or fish Pureed vegetables or commercial brand meal Breast feed or bottle	Pureed meat or fish Pureed vegetable Stewed fruit or commercial brand fruit Diluted fruit juice or cooled boiled water from a cup.
Tea	Breast feed or bottle	Breast feed or bottle	1-2 teaspoons steamed fruit or commercial brand fruit product Breast feed or bottle	Breast or bottle feed if necessary
 				
	6-7 months	7-8 months	9-12 months	
Early Morning	Breast feed or milk drink	Milk	Milk	
Breakfast	Cereal (wheat based) or hard boiled egg Wholemeal toast or breakfast milk from cup Bottle or breast feed	Cereal or hard boiled egg Wholemeal toast, butter and breast feed or bottle of milk from a cup	Cereal or hard boiled egg or grilled bacon or grilled sausages Wholemeal toast Breast feed or milk from cup	
Dinner	Minced meat or fish mashed vegetable or Stage II baby food Fresh fruit pureed, stewed or mashed or brand fruit Fruit juice	Minced meat or liver Mashed vegetable Stewed fruit or fresh fruit or brand foods Fruit juice or water	Meat or fish or liver — chopped Vegetables Rice or potatoes Chapati or pasta Milk pudding or yoghurt or fruit Fruit juice	
Tea	Home cooked savoury food or purchased meal Fresh fruit or yoghurt Breast feed or bottle or cup	Mashed fish Mashed pulses — eg peas, beans or lentils or brand meal & fruit dessert Breast feed or bottle	Cheese on toast or beans on toast or fish, rice plus pulses Milk	
Evening	Breast feed or milk	Breast feed or drink of milk	Breast feed or drink of milk	

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Tasty, tasty, very very tasty

With 800,000 new babies expected in 1990, it's not surprising that baby foods are big business. The baby boom generation of the '60s are now grown up and having babies of their own; so the '90s will themselves see a baby boom, with the number of births rising from 750,000 a year in the mid-70s to over 830,000 a year by the middle of this decade.

There are differences, however, in the way parents now feed their children and in lifestyles generally, which makes the babyfood manufacturers confident of success in the years to come.

Today's average first time mum is 26½ compared to 25 just ten years ago. She is therefore likely to have worked longer and have more money to spend. She is also likely to return to work more quickly after having the baby.

While food preparation is still, by and large (ignoring the "new men" for the moment) a task taken on by women, young mums nowadays are more mobile and more reliant on things which make life easier, like disposable nappies, microwaves and cars. Ready-to-serve babyfoods, or those that require only preparation are used by many more mothers than they were even a few years ago.

When faced with a choice of what

prepackaged babyfoods to buy, mums have a basic two way choice: wet or dry. Wet foods, in jars or tins, offer portability and greater convenience, while dry foods, which have to be mixed with water, are generally more economical, though pack sizes make the initial outlay rather more.

One of the trends in recent years has been for the manufacturers to segment their ranges according to mealtimes and/or by age range. The mealtime segmentation is particularly evident among the dry food manufacturers Milupa, Robinsons and Farley's, while Cow & Gate and Heinz, leaders among the wet foods boys, tend to segment more by age — and food consistency.

When laying out babyfood shelves to make an attractive display, it is worth while bearing in mind these segmentation patterns as they help mums doing their shopping to achieve a balanced diet.

Manufacturers too have not been slow to pick up on the wholesome food approach. Packs now contain a great deal of information on food content, and the gluten-free, no added salt, no added sugar, no additive or colourings bars are familiar sights on most packs. Most companies now also produce vegetarian dishes.

development, for example a flavour component may contain preservatives or artificial additives or be otherwise unsuitable.

"Having established a small core of suitable flavour components for a new product, the technologist uses his expertise to blend the flavours to give the desired final flavour," Bob Brocklebank says. "In Farley's system, 'desired' will be by consensus of approximately ten people tasting the product and the technologist collating all the comments, for example poor texture, too little fruit, too sweet, and reformulating accordingly." If all is well at this stage, the "end user" are brought in. "Once we are totally satisfied with the product we conduct extensive tests in the home with mothers and babies over a number of weeks or months and use their comments to reformulate the products if necessary," says Mr Brocklebank.

The system is much the same at the other babyfood manufacturers. At Heinz, the baby food team includes a full-time chef and a nutritionist as well as research and marketing experts. The team works solely on Heinz babyfoods from researching the flavours to assessing the nutritional content, as well as manufacturing testing and marketing. The product range is regularly tasted by the team, who also conduct market research among mothers and babies.

Robinsons say they formulate their baby foods with the latest agreed medical opinion in mind. "No food or drink variety becomes part of our range until it has been subjected to rigorous testing by our mother and baby panel to ensure that Robinsons offer the best tasting products on the market," comments product group manager Deborah Wilson.

At Milupa, too, a team of scientists ensure that foods are nutritionally well-balanced. They work closely with the medical profession to ensure that the latest recommendations and regulations are incorporated into updated and new products.

Q&A

It is over two months since my wife gave birth to our first child. She is still feeling very depressed and bursts into tears for no good reason. Is this still the "baby blues" and what can I do to help?

"Baby blues" is the name given to the depressed feelings of new mothers which usually last less than a week after birth. It sounds as if your wife is suffering from post-natal depression, a distressing condition which affects about one mother in ten. It does get better with treatment and the bad days gradually become fewer, so it's important you go with your wife to your doctor as soon as possible. The Association of Post-Natal Illness (Tel: 071-731 4867) is an excellent source of help and advice.

I recently bought a thermometer to use when I bathe my six-week old baby. However, I stupidly threw away the instructions by mistake. What is the correct temperature for the water?

The correct temperature for bathing a baby is 37°C or 100°F. It is always best to put in the cold water first and then gradually add the hot water until you reach the right temperature.

I've recently left home and am sharing a flat with friends. How can we make sure we eat a balanced diet?

There is little to stop us all eating a healthy diet, but too many of us get the balance wrong. The healthy way is to cut down on fat, sugar and salt; eat more fibre-rich foods, include plenty of fresh fruit and vegetables, go easy on alcohol and get plenty of variety in what you eat.

My sister and I both notice that our acne and greasy skin problems clear up everytime we go abroad for our summer holidays. Why is this? It is known that sunshine and fresh air can have a beneficial effect on acne. They dry the skin and cause slight scaling, which reduces the acne. However, don't overdo the sunbathing — sunburn is worse than acne! My 70-year-old brother is suffering from senile dementia and I'm finding it difficult to cope looking after him at home. Is there anyone I can turn to?

Senile dementia, when the brain ceases to function normally is a common disorder in people over 65, and may, in rare cases, occur in younger people. Symptoms include insomnia, restlessness, forgetfulness and mood swings. Your doctor will be able to suggest ways of coping with this problem and provide information. The Alzheimer's Disease Society also offers a counselling service. You can contact them on (Tel: 071-381-3177)

A friend said she has to have her ingrowing toenail removed at the hospital. Can the problem be that serious?

Yes — if the toenail becomes embedded in the flesh of the toe as it grows, it can cause painful swelling. If this is allowed to continue, the condition can be severe enough to need surgery to remove the nail under local anaesthetic. However, your friend has an extreme problem. In most cases the pharmacist would be able to recommend a product treatment which softens not only the toenail but the calloused skin of the nail groove, which would reduce pain and help restore healthy nail growth. To prevent the problem, it's important to cut your toenails straight across rather than in a curved shape.

My mum has bought me my first bottle of expensive perfume. What is the best way to keep it?

Perfumes keep best in the cold and dark, so try and avoid keeping the bottle on a dressing table in direct sunlight. Also remember to close the bottle tightly every time after using it — otherwise your perfume will evaporate.



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RETA

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E	U	I	P	E	R	S	O	N	A	L	F
S	E	K	J	R	L	Y	S	D	A	C	I
H	O	S	W	X	A	H	F	W	R	X	D
N	D	Q	F	D	S	C	S	G	H	F	E
E	H	U	I	X	H	L	T	D	I	G	N
S	W	L	R	W	G	D	R	I	Q	D	C
S	O	F	X	F	U	Q	O	O	U	C	E
H	S	F	G	S	H	D	H	F	S	A	A
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SUMMER FRESHNESS TISSUES CONFIDENCE PRACTICAL HOLIDAY CLEANSING PERSONAL

Name:

Position:

Pharmacy address:

.....

Signature:

Size (For Bodyshaper) Please tick as appropriate:
Small (32) Medium (34) Large (36)

The rules

1. All entries must be made on this form. All entries become the property of Crookes Healthcare Ltd.
2. The competition is not open to employees of the Boots Company plc, Crookes Healthcare Ltd, their families or the companies agencies.
3. No alternatives, cash or otherwise, will be given to the prizes.
4. The holiday must be taken before end of 1990. Dates must be accepted as offered.
5. The judges' decision is final. No correspondence will be entered into.
6. The closing date will be July 29, 1990 and results will be announced during Aug 1990, and published soon afterwards.



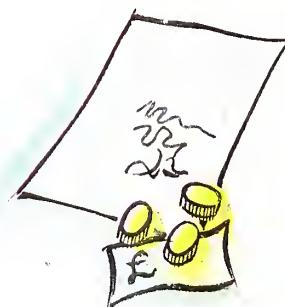
Send your completed entry form to C&D/Femfresh competition, c/o Chemist & Druggist, Benn Retail Publications, Sovereign Way, Tonbridge, Kent TN9 1RW.

Ten really useful things to do in your tea break

1. Go for a brisk walk — this helps keep you fit, and exercises the leg muscles. Since you stand for most of the day, you are more likely to suffer from varicose veins; strengthening the leg muscles can help to prevent this.
2. Do a ten minute workout — nothing too complicated, or that involves too much jumping around. Work on a different body area each day, then start again next week.
3. Make a list of things to do — not at work, but in your lunch break, at home in the evening, at the weekend, or any spare time you've got. This can be a mental or written list. It simply helps you to be more organised and manage your time better,
4. Give yourself a quick manicure — nothing looks worse than serving customers with grubby nails! In ten or 15 minutes you probably won't have time to paint them, but you can soak them, push back the cuticles, file them, and even put on a protective base, ready to complete the job at home in the evening.
5. Give yourself a quick pedicure — okay, so customers don't see your feet, but these often neglected parts of the body do need attention from time to time. Since you're on them all day, give your feet a treat — a nice five minute soak.
6. Tidy up and clean the staff room — you probably have a rota for this already, but if you don't it's worth doing. You can relax more easily in a nice environment, and you need to get away from it all in your break.
7. Water the plants — plants can make a rather impersonal staffroom feel more like home. They do need watering from time to time, and you can even talk to them...if you feel so inclined!
8. Clear out your hand bag — it's amazing how much rubbish we carry around that has built up after many weeks (months?). Come on...sort it out!
9. Teach yourself a new skill — learn to crochet, knit, write short stories, sketch, speak French — whatever appeals, do it.
10. Keep up-to-date with what's happening in pharmacy, whether it's new products, regulations, or anything of importance to the profession. We recommend that you put your feet up with a good read... *Over the Counter*.



Diabetes Awareness Month on Merseyside



A campaign to inform the public that pharmacists can play a bigger role in diabetes care starts on Merseyside this month. If the project is successful, it may be launched nationwide.

Diabetes Awareness Month is a joint initiative between the National Pharmaceutical Association and Ames, who make a large range of glucose monitoring equipment.

"We started the project by mailing all NPA members in the area with a questionnaire, and got an excellent response. Pharmacists were very keen to take part," says Collette McCready, NPA head of public affairs.

There were two training evenings to prepare pharmacists for the campaign, on "The pharmacist's role in diabetes care". They provided background knowledge about the condition, its treatment and management. Speakers included a diabetes

specialist nurse, and a diabetes sufferer giving the patient's point of view.

The campaign was publicised to the local press by Mrs McCready and Liverpool community pharmacist Jeremy Clitherow in the last week of May; radio interviews are also planned.

Participating pharmacies have been supplied with window posters, Ames display leaflets and booklets, British Diabetic Association leaflets, and 20 will have Ames equipment on display in-store. All pharmacists will receive "An introduction to diabetes", and a guide to relevant drug interactions.

The object of the campaign is to raise the profile of pharmacy with the general public, and also to detect those diabetes sufferers who have "got lost in the system". Not undiagnosed sufferers, but those who perhaps were diagnosed a long time ago, haven't been to a doctor for a long time, and whose needs may now be different.

"By encouraging dialogue, the pharmacist can decide whether or not they need to be referred, and pick up those who don't seek help when they should," says Mrs McCready.

Pharmacy assistants in the Merseyside area should have a look at the literature that is sent to the pharmacy, and make sure they can answer simple questions on the condition — the campaign is sure to arouse comment. Anything more serious should, of course, be referred to the pharmacist.

Just so pharmacy assistants in the rest of the country don't feel left out, have a look at our Factfile on diabetes in *Over the Counter*, December 1989, p9.

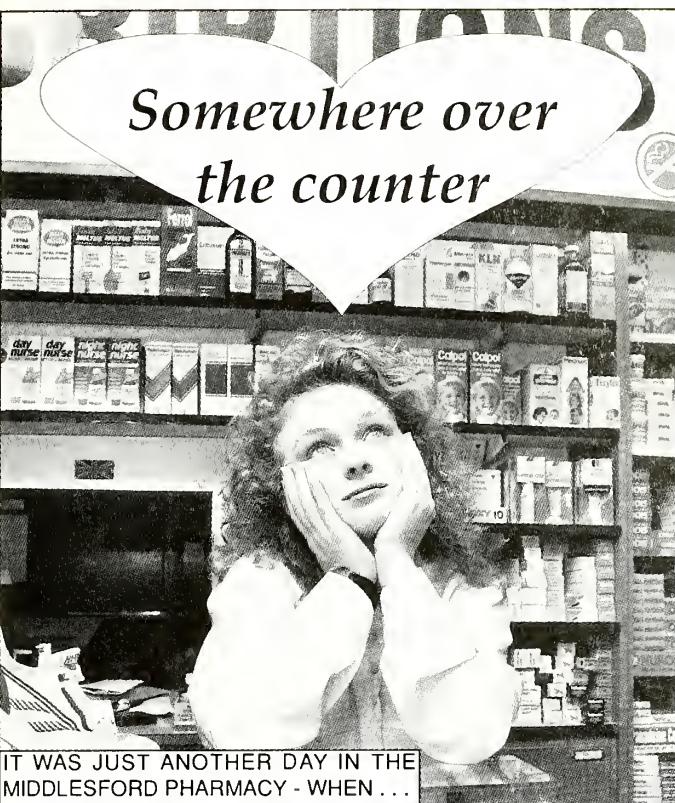
Q&A

My toddler is 18 months old and I'm wondering whether to give him fluoride tablets. What do you advise?

First, I would suggest you find out whether there is fluoride already in the water in your area by asking your doctor, pharmacist or local Water Board. If your local water supply does not contain fluoride, the same benefits can be obtained by using fluoride tablets or drops, which are available from your pharmacy. The pharmacist will be able to advise on a suitable product and dosage. As soon as your child is old enough, encourage him to chew or suck the fluoride tablet. As an additional benefit you should brush his teeth daily with a small amount of fluoride toothpaste.

My husband and I enjoy our twice-weekly visits to our local pub. But I'm worried that the amount we are drinking might be affecting our health. How much is it safe for us to drink? For the sake of your health you should realise that long-term drinking will not only cause liver disease, but can damage the stomach, pancreas and intestines too. Your husband should try to limit himself to 21 units of alcohol a week. As women are affected more by alcohol than men because of their lower body weight and different physical make-up, you should not drink more than 14 units of alcohol a week. One unit is the amount contained in half a pint of beer, a glass of wine, a measure of sherry or a pub tot of spirits.

Somewhere over the counter



IT WAS JUST ANOTHER DAY IN THE MIDDLESFORD PHARMACY - WHEN ...



... KEVIN WALKED IN

WHAT A BEEFCAKE !

HELLO, I HAVE A RATHER PERSONAL AND EMBARRASSING PROBLEM.

OH DEAR.



I JUST DON'T KNOW WHAT TO DO. I THINK I HAVE ATHLETE'S FOOT.

NOT THE UNPLEASANT AND IRRITATING FUNGAL COMPLAINT?

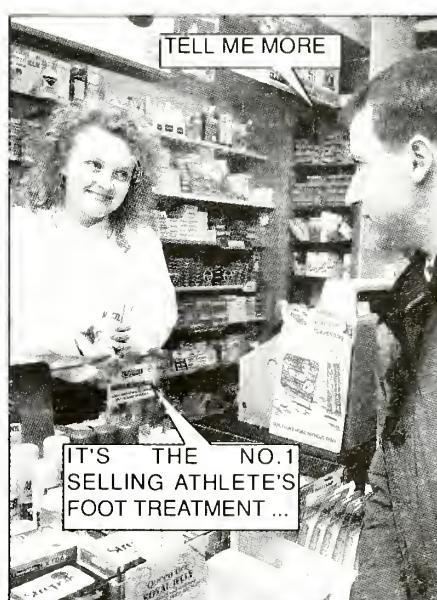
SHIRLEY'S HEART RACED



YES. IS THERE ANYTHING TO HELP?

STEADY GIRL

WELL, MYCIL IS VERY GOOD



TELL ME MORE

IT'S THE NO.1 SELLING ATHLETE'S FOOT TREATMENT ...



THE WORDS FELL OUT OF HER MOUTH

... AND IT CONTAINS TOLNAFTATE WHICH IS A TRIED AND TRUSTED ANTIFUNGAL AGENT ...

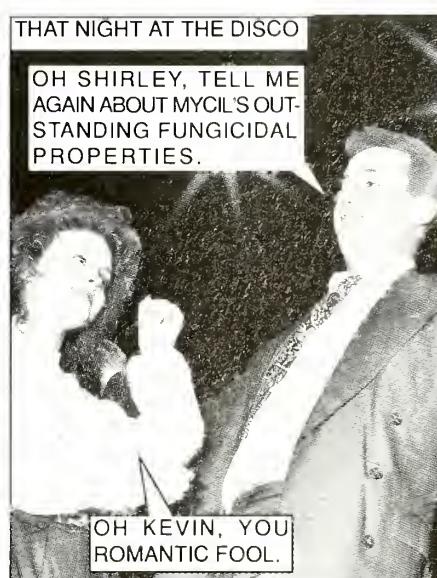
SIGH



KEVIN'S HEAD SPUN BUT SHIRLEY WAS UNSTOPPABLE ...

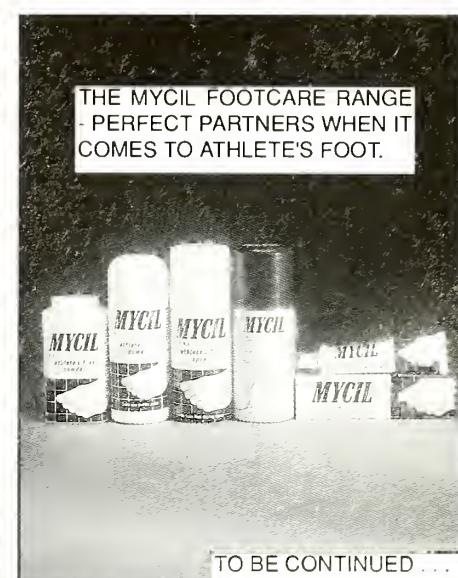
. . . AND REGULAR USE WILL ALSO HELP PREVENT FURTHER INFECTION.

I'LL TAKE SOME! BY THE WAY, I WAS WONDERING ...



THAT NIGHT AT THE DISCO
OH SHIRLEY, TELL ME AGAIN ABOUT MYCIL'S OUTSTANDING FUNGICIDAL PROPERTIES.

OH KEVIN, YOU ROMANTIC FOOL.



THE MYCIL FOOTCARE RANGE - PERFECT PARTNERS WHEN IT COMES TO ATHLETE'S FOOT.

TO BE CONTINUED ...

Q&A

I read in a women's magazine that we should take medicine against malaria in some countries. Is malaria really dangerous?

Yes. There are different types of malaria and some recur for years. It is a very unpleasant disease. During an attack, the sufferer feels very cold and shivers, but at the same time has a raised temperature. This can be followed by hot flushes and high fever. This then subsides into a sweating stage and the patient recovers until the next attack. It is always wise to ask your pharmacist which anti-malarial products are most suitable to take when visiting particular countries.

My teeth are very close together and I'm worried because I just can't seem to be able to clean between them properly. Can you suggest anything?

Yes — there are various brushes, dental flosses and specially shaped toothpicks designed to help with this problem. Ask your pharmacist to recommend one of these dental aids. You could also visit your dental hygienist, who will show you how to use them.

I've recently bought a sun-bed, and have been advised to follow the instructions carefully especially if I was on the Pill. Why? This is sensible advice. Some medicines such as antibiotics and some contraceptive Pills may make the skin more sensitive to sun-burn. So enjoy your new purchase, but be extra careful and avoid overdoing your "sun-bathing"! Always wear protective goggles when using your sun-bed.

My friends and I were discussing contraceptive methods and one of them mentioned IUD's. What is it?

An intrauterine device (also known as an IUD, loop or coil) is a small, flexible plastic object between two and four centimetres in length. It is inserted into a woman's womb in order to prevent pregnancy. The IUD works partly by preventing the egg from settling in the womb. It is a very reliable type of non-hormonal contraceptive.

Last months answers

Last month's Wordsearch centred around the chest pains being suffered by a middle aged man. The man's symptoms of pain coming a couple of hours after a meal pointed towards a possible ulcer. The missing words in the story were: chest; burning; breast bone; antacid; worse; seconds; pharmacist; ulcer.

In our Match-up competition, the six groups from the list who are generally exempt from prescription charges were:

Factfile



Subject: World health

1. Of the 50 million deaths that occur in the world each year 15 million are infants and children under the age of five, according to the 1989 World Health Statistics Annual published by the World Health Organisation.
2. The picture may well improve over the next few years as significant progress has been made worldwide in immunisation coverage. However, vaccine-preventable diseases of childhood still claim nearly three million lives per decade.
3. A staggering 770 million children suffer from acute diarrhoeal disease annually. This is associated with an estimated four million deaths under the age of five. However, the report reveals that it is not the diseases that kill the children, but the dehydration and malnutrition that they create. Over two thirds of these deaths could be prevented with an inexpensive therapy of oral rehydration, claim WHO.
4. Although infant mortality is generally used as a yardstick to measure a country's general health status, the report estimates that the consumption of tobacco is responsible for over two and a half million youth and adult deaths each year principally from lung cancer, heart disease and chronic bronchitis. WHO claims that more lives than ever before in Third World countries are

being claimed by cigarette smoking. Sad, when smoking is on the decline in the UK. In direct response to this, WHO has organised its second No-Tobacco-Day in which it urges countries worldwide to "dedicate to the cause of tobacco-free societies". The event will take place on Thursday May 31 with an appeal to those who smoke or chew tobacco, to quit for 24 hours. This year WHO has focussed on the threat to the health of children and has chosen "Growing up without tobacco" as its slogan.

5. More than 1.6 billion people worldwide are still suffering from tuberculosis — long since eradicated from the UK — and the killer disease still claims three million lives annually, mostly in the Third World, where the risk of infection is 100 times greater than in the developing world.

6. One out of every 20 teenagers and young adults contract a sexually transmitted disease each year and by late 1989, WHO estimated the cumulative number of AIDS cases worldwide to be close to 600,000, more than half of which are thought to have been in sub-Saharan Africa.

7. A further indicator of a country's health status is the accessibility of healthcare. One of the main sub-indicators here is the attendance of pregnancy and delivery by trained personnel. For countries able to provide information, it appears that nearly 38 million pregnant women were not attended during their pregnancy and 46 million women delivered without the assistance of trained personnel.

8. In developed countries 11 million deaths occur annually — this includes 3.4 million before the age of 65. The report estimates that of these 11 million deaths, 2.4 million can be attributed to heart disease, 2.3 million to cancer, 1.5 million to stroke, 0.9 million to respiratory diseases and 0.8 million to violent causes.

9. Given these figures, WHO projects that one in three children would on average eventually die from heart disease, one in five from cancer and one in seven from a stroke. However, on a more positive note, life expectancy in developed countries is still high, estimated on average at 73.7 years.

pregnant women; men over 65; diabetics; colostomy patients, epileptics; and children under 16.

Mrs A. Dobrowski
Lloyds Chemist, 18 High Street, Wednesfield, Wolverhampton

Birkenhead, Wirral, Merseyside

L. Lloyd
Portslade Medical Supplies, Church Road, Portslade, Sussex

Carole Edwards
Nicholson & Partners, 181 Walton Hall Avenue, Walton, Liverpool

Mrs Janet Coughlan
Andrew Tylee Ltd, 25 Hyde Park Road, Leeds

Mrs A. McDonald
Ogg & Company, 44 Newmarket Street, Ayr, Scotland

Last month's winners

Wordsearch No 9

Christine Thomas
Harrison's, 3 Market Place, Driffield, North Humberside

Mrs C. Downes
Archer Pharmacy, 289 Archer Road, Stevenage, Herts

Michelle Dymond
G.E.J. Snell, 140 King Street, Plymouth

Match-up No 4

Mrs G. Walker
G.E. Dale MPS, 224 Bebington Road, Rock Ferry,

SALES BOOSTER

Give your sales a healthy boost this Spring with the exciting new look Evans vitamin and supplement range. Modern and colourful, these attractive new packs have been designed to appeal to the eye and the pocket. To create maximum impact the new packaging is also reflected on the shelf strips and information leaflets available as point of sale material.

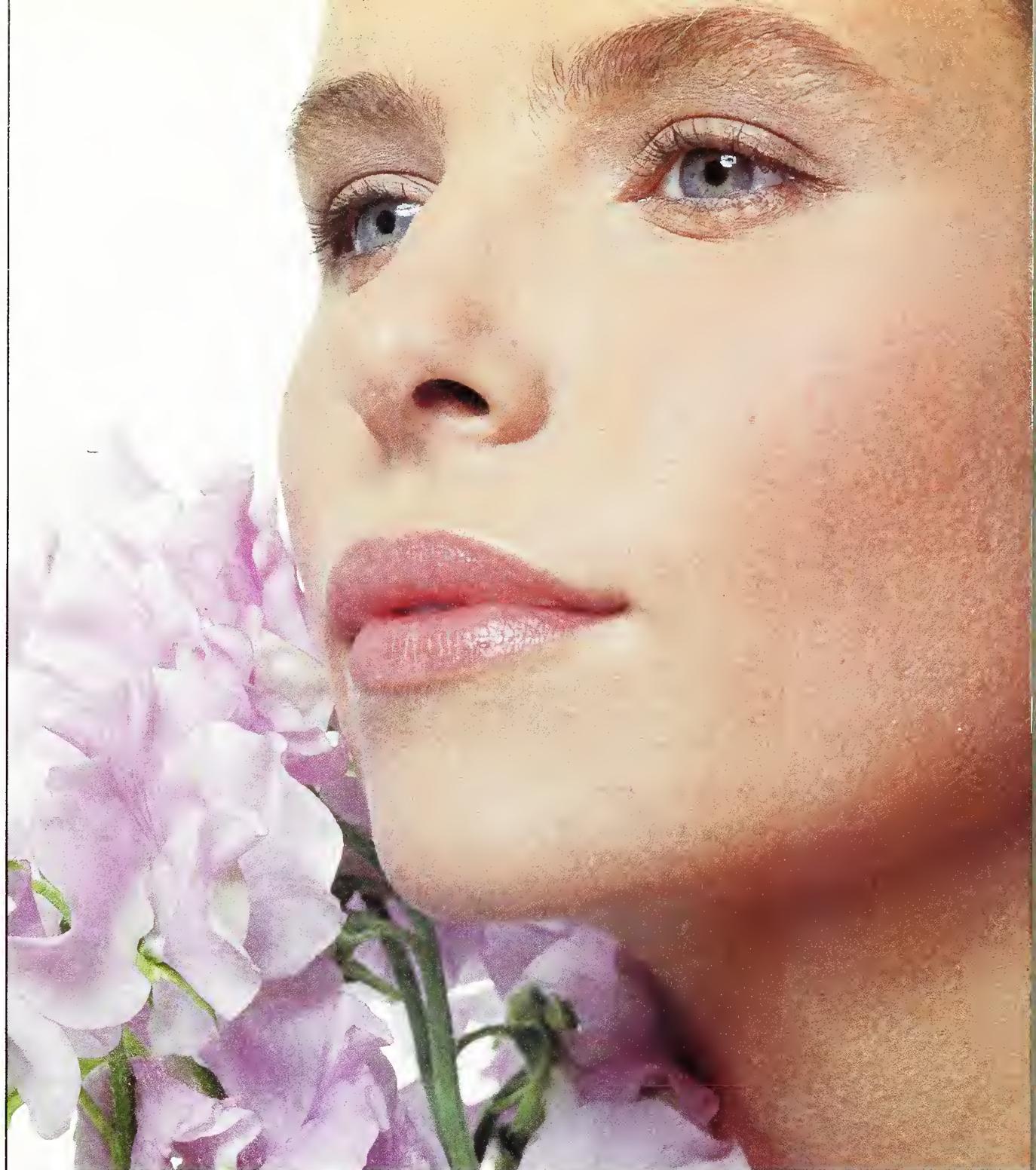
The new design is a wholesome reflection of the value for money product inside each pack – a nine product quality vitamin and supplement range with two new additions, Royal Jelly and Garlic. None contain added preservatives or artificial colours.

The new look Evans Vitamin range has opportunities for everybody. So stock up now with Evans – **THE SALES BOOSTER**.

For further information see your local Evans representative.

VITAMINS FOR EVERYBODY





Pond's: a heritage of quality

It would be difficult to name a brand of skin care products that has a longer-standing reputation for quality and value than Pond's. Since the launch of the first Pond's product in 1907, generations of women throughout the world have entrusted their complexions to Pond's.

But Pond's skin care has come a long way from those first days, when just two of the famous creams were available — the cold cream cleanser and the vanishing cream. Those two favourites are now the foundation of a range of skin care products,

and today's woman can plan her beauty regime with the Pond's range.

Re-launched in 1989, the line includes everything a woman needs to take care of her skin. The dry skin cream is a rich creamy moisturiser, and while smoothing out dry lines, it protects the skin from natural moisture loss, which can cause fine lines to appear, leaving the skin radiant and younger looking. The light day cream is a quickly absorbed moisturiser, protecting the skin from the drying effects of today's severe environment and imparting a smooth

lustre to the skin. Pond's famous vanishing cream is now a light greaseless moisturiser, which helps to reduce oiliness, leaving even greasy skin free from shine. The gentle rinse-off cleanser is both fragrance- and soap-free and washes away make-up without drying the skin. The cold cream cleanser is thorough enough to remove all traces of the day's grime (even waterproof eye make-up), but gentle enough to leave the skin feeling soft, fresh and youthful. The deep moisturising night cream is a rich blend of oils and moisturising agents,

helping to restore the moisture balance of the skin while you sleep.

...suited for mature skin

Not only does the Pond's range cater for every skin type — whether it needs deep or just light moisturising care — more importantly today, there's no brand that is better suited to the needs of mature skin. As you probably are aware, the strongest demographic sector of the national market is the 35-55 year-old bracket, which is set to grow stronger each year.

And research has shown that it is this group of consumers who have the greatest awareness of Pond's as a manufacturer of high quality beauty products at sensible prices.

Over 80 years in the market is a long time to build up a reputation, and it's no surprise that after flirting with new brands for a while, the Pond's woman invariably returns to the products she knows she can trust.

Pond's clearly enjoys a solid position of consumer favouritism and loyalty, which is reflected in its status as the third most successful brand of skin care toiletries in Britain. The skin care market in 1989 was worth £249m and is expected to grow to £261m in 1990. And yet the volume growth area within this market is not coming, as you might think, from the beauty counter designer ranges, but from the self selection lines, which account for a startling 55 per cent of the market.

Modern, softer appearance

But just because Pond's creams have become something of a national institution, doesn't mean to say that they're prepared to rest on their laurels. Far from it. Last year's relaunch saw a remodelling of both looks and content to bring the range right up-to-date, resulting in a co-ordinated range with a more modern, softer appeal. The lines of the familiar bottles were modified to create a more elegant jar, and the famous tulip motif was incorporated into an altogether prettier design. The smart new boxes are colour coded in modern pastels for easy identification, and embossed to suggest a quality product inside the packaging.

The new design creates an impressive line-up on the shelf — instantly recognisable to the regular customer and eye-catching and attractive to the newcomer. But the changes haven't just been cosmetic. The night cream, dry skin cream, and light day cream have all been developed to a lighter, more contemporary formula. A whipped fluffy texture melts into the skin for instant interaction.

All these changes came about with the acquisition of Pond's by Elida Gibbs in 1987. Concerned that Pond's creams were being taken for granted, they began a massive promotional push that included the re-launch in 1989, and continues today. As an indication of the confidence that Elida Gibbs has in Pond's potential, this Spring the company launched a national TV advertising

campaign worth £1,060,000 featuring the new range. A further £458,000 is being spent on national Press advertising, which will run in the quality weekly and monthly magazines over the next six months.

Solid trade support

As with all its products, Elida Gibbs will be backing the brand with solid trade support, including an eye-catching two-tier point-of-sale display tray which is available for stockists to show off the complete range to best effect. To obtain your free display tray, telephone on 071-409-6286.

For, as every experienced retailer knows, the greater the range on display, the greater the appeal to the customer. With a complete beauty routine before her eyes — all at affordable prices, and in a range of sizes — there's undeniably a strong temptation for your customer to try more than one — whether she is a regular user, or is looking to dip into a complete range.

The national advertising will alert potential customers to the new formulations and new image of Pond's creams, and reassure regular users that the classic range is still synonymous with quality.

Pond's has built an international name on offering effective and high quality products at no-nonsense prices, trusted by women the world over. And with a brighter-than-ever range for the customer to choose from, 1990 looks like an auspicious start to the next 80 years...





Leg-it for the sun

With Summer just around the corner it's time to give a little thought to the bits of our bods that haven't been aired in ages. We spend the Winter in tights and come Summer we are faced with palish pins we feel too ashamed to show. Over the Counter looks at ways to prepare legs for their first exposure so you won't feel like legging it as soon as the sun shines

Following a long stint in woolly tights or nylons there will be few among us who can claim to have the perfect pins for Summer. Chances are most legs will be flaky, pale and, worst of all, slightly flabby after a Winter of over-indulgence and lack of exercise. This is your chance to swot up on a few handy hints to pass on to customers wanting to get their legs back into trim for long hot days spent in shorts or swimsuits.

Remember the length and basic shape of our legs is determined by our genes so

basically what you see is what you've got. However, correct exercise and care can do wonders to add shape to skinny legs or trim down flabby thighs.

Starting at the top

The only way to attack flabby thighs is to exercise regularly and sensibly. A crash exercise course a week before your hols won't work miracles and you should advise customers worried about their thighs to

follow gentle toning exercises throughout the year. Useful ones to recommend include:

- Sit on the floor and spread legs apart in a fan shape. Slowly bend forward from the waist and clasp the right ankle with the right hand and then the left ankle with the left hand 30 times.
- Simulate cycling by lying on back with legs in the air and hands on hips for support
- Settle on all fours. Bend one knee forward and bring it up to the chest then extend it backwards in a straight line. Repeat with the other leg 30 times each.

Swimming, cycling, dancing and walking are also excellent exercises for legs.

Friction massage is unbeatable for improved circulation. Thighs should be rubbed vigorously with a loofah or massage glove. A great tip is to add coarse

sea salt to the loofah. This can help to improve the skin's texture and colour. Some experts say that alternate sprays of hot and cold water can also help tone up thighs.

Shaping up shins and calves

After a long, hard Winter, lower legs usually suffer from a severe attack of the scabies. You may feel that you're losing half of your skin, but don't worry, the problem is easily solved. Dead skin accumulates on the legs because they are generally starved of fresh air, spending a Winter smothered in tight nylon stockings or trousers.

Lotions and creams might seem like the immediate solution. They will take away dry skin initially, but long term they are useless unless the dry skin is removed first.

A useful tip for legs especially prone to dryness is to exfoliate the legs at bathtime several times a week with a loofah. Coarse salt will deal with the more stubborn areas — but go gently! They should be rinsed properly and an abundance of moisturiser applied. In severe cases olive oil can be used to bring back lovely legs, but it can be a bit messy so take care!

Tips for toning

To get calves back into shape a simple, but effective, exercise is to stand with legs apart, feet flat on the floor, holding the back of a chair. Gently rise to toes and then return to standing position. Repeat this 20-30 times a night. Walking and swimming are also good exercises for calves.

No more hairs

Nothing looks worse than bare legs covered in a coarse film of black hair. Until attitudes to unwanted hair change, hair removal is a must. In Winter it's easy to be lazy, but in Summer there is no cutting corners. Nowadays, hair removal is simple and there are numerous methods to choose from. Shaving is quick and easy, although regrowth is speedy and tends to be stubby. Using cream or foam depilatories takes time, but the results are smooth and regrowth is soft and slow.

At one time waxing was only done in the beauty salon. Nowadays there are lots of home waxing kits to recommend. Although it might sting, waxing is one of the most satisfactory treatments. Hairs are pulled out by the roots — ouch! but regrowth is slow and fine.

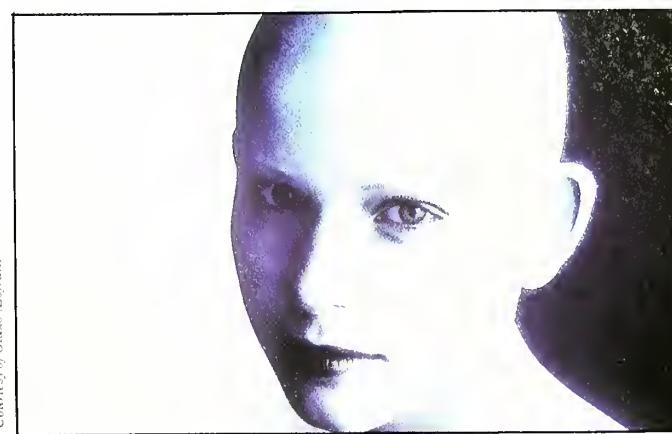
Adding a bit of colour

After a Winter of being covered up and deprived of air, legs have every right to go pale at their first airing. Until they get a bit of colour there are two solutions — grin and bare it or fake it.

There are numerous fake tans on the market and as formulations become more sophisticated, the effects can be extremely convincing. Basically, they come in two types, the semi-permanent stains or the rub on, wash off varieties. Both must be applied properly, evenly and without streaks to avoid giving the game away. Bright orange streaky legs look far worse than pasty ones. Start cautiously — especially with the leg dyes, it's easier to add more colour than to remove it. Also remember to use protection in the sun as few fake tans contain adequate protection for serious sunbathing.

Hair today, gone tomorrow

To see a bald man is not unusual, but how often do you see a bald woman? We take a look at what happens when a woman loses her crowning glory



Courtesy of Glaxo (Zyfstan)

The next time you feel like complaining that your hair is too greasy, too fine, too short or whatever, think again. Be thankful that you've got it! And the next time you're tempted to take it for granted (too much heat, perm *and* colour it at the same time, etc), don't!

We can't all have a beautiful mane, but any hair is better than no hair. A lack of hair can cause acute anxiety and loss of self-confidence.

It's bad enough for men, 40 per cent of whom lose hair successively from various parts of the scalp — a hereditary part of growing old. You must have seen how some try to disguise the fact that the hairline has receded from the forehead, temples and crown by combing the remaining hair over the bald patch! At least it's accepted.

Female hair loss is different from male pattern baldness. If it occurs from middle-age onwards, it usually takes the form of a generalised thinning of head hair (diffuse alopecia). But there's another type of hair loss which can affect both men and women at any age.

As many as one in a hundred people lose their hair through the scalp disease alopecia areata, experts say. This freak hair loss strikes without warning, so that someone who may have a normal head of hair suddenly loses it. The hair comes out from the root in clumps. It usually starts with a small bald patch, and may or may not spread further. In some people it starts as a diffuse loss and then progresses to alopecia areata. Some lose all scalp hair as well as eyelashes and eyebrows (alopecia totalis); or all scalp and body hair (alopecia universalis).

Men are ten times more likely to be severely bald than women (famous examples are Duncan Goodhew and Yul Brynner). But the total number of people severely distressed is about the same for each sex, because women find losing their hair more traumatic. At best they feel unattractive and at worst, suicidal.

Causes

Hair loss in women may occur after childbirth, in atopic people (asthma or

eczema sufferers), if the Pill is being taken, after acute physical or mental stress such as fever or bereavement, due to genetic factors, hormone imbalance, cosmetic trauma, strict dieting, or drug treatment.

A third of all patients get just one small episode, and recover with no recurrence. Hair usually regrows within a period of some six to nine months. Another third experience a relapse six months after the first episode and recovery takes much longer. They may be plagued by odd patches all their life. Where hair loss is total, 20 per cent of all causes never recover from the first episode.

Sometimes excessive hair loss is caused by disorders such as a thyroid dysfunction or lack of iron, and the underlying cause can be medically treated.

Solutions

1. Medical treatments Minoxidil solution (Regaine) has now been approved for use in women with thinning hair. It is not a cure, and does not work for everyone. It is applied to the scalp twice daily, and should be used regularly to promote regrowth within four month. It is fairly expensive (£30 per month), but is the treatment most often prescribed. Other treatments include steroids — orally, topically or by injection — as well as dithranol and immunosuppressive drugs.

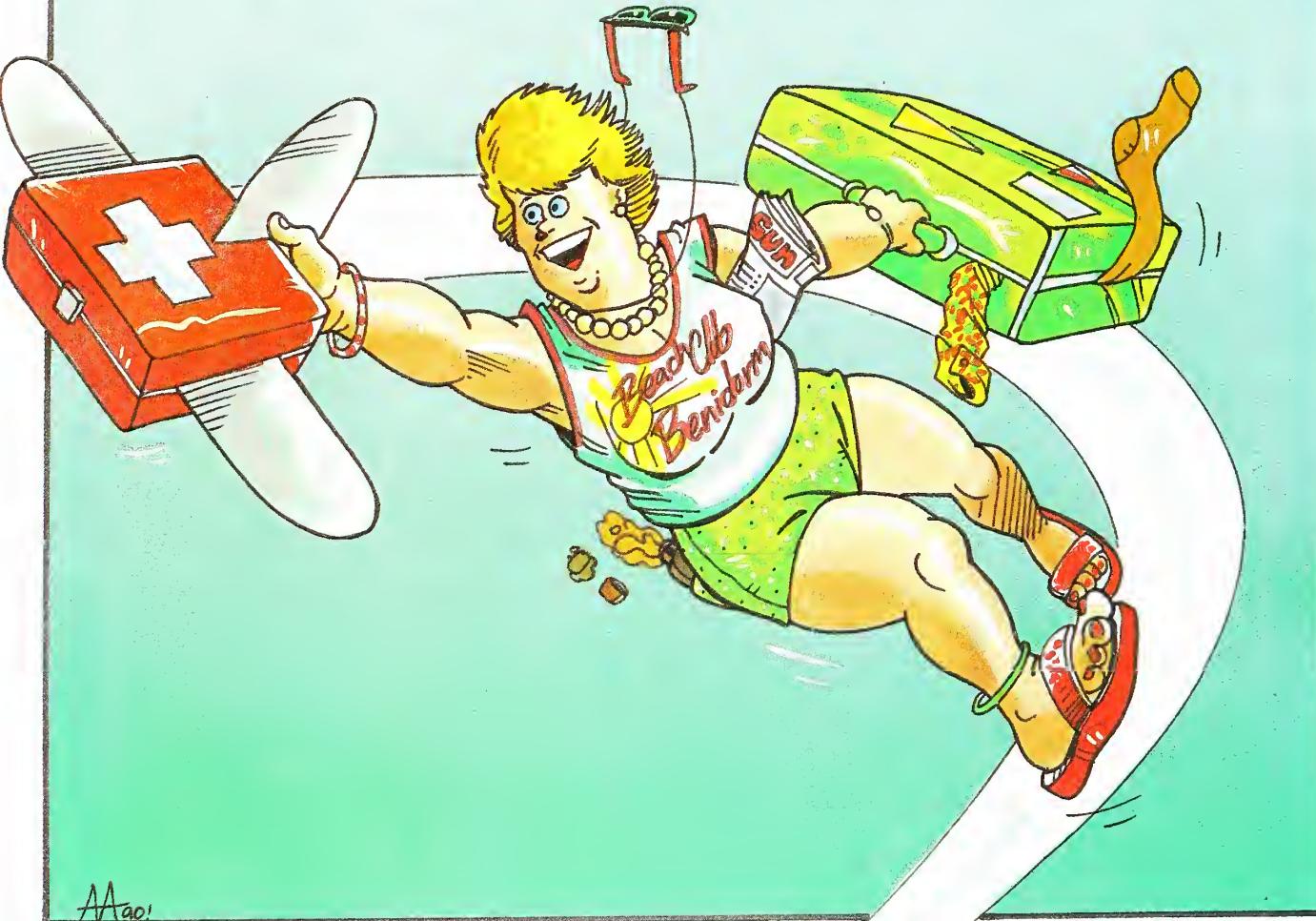
NB In the UK vitamin preparations for hair loss are food supplements only, although Pil-food is prescribed on the Continent.

2. Transplant surgery Results are not always good, and the expense may be prohibitive.

3. Hair weaving Involves weaving a hair piece in with the existing hair. It may worsen the condition if too tight. And not only do you pay for the weave, but also for the upkeep as your hair grows.

4. Wigs A wide variety of realistic looking wigs are available on the NHS, from professional wigmakers, department stores or, if you're bashful, though the post. Some are made from real human hair, and others are acrylic. They can be secured onto the head with tape.

Wish you were here



Holidays are usually the highlight of the year. We build ourselves up for them months in advance and talk about them for months after we return.

However, all good holidays must be planned carefully to avoid the horror of arriving at the airport without a passport or at the hotel without a toothbrush!

In most cases mishaps can be rectified but it's better to avoid them in the first place and be prepared. It's all about common sense, but our quick guide will help you to remind any confused customers of the most important items that should be on their holiday check list.

'I don't feel well'

Nobody likes to think they're going to be ill when they go away; but just in case minor mishaps happen, advise your customers to take a first aid kit along with them. Use our checklist as a guide.

Remind customers on regular medication to take it with them, and to take enough! It should be properly labelled, to avoid problems with customs; and since suitcases sometimes go astray, it's best to carry essential items in hand luggage. A doctor's note may be needed for some medicines.

Medical insurance is also essential for travellers abroad; remind your customers to check that they are covered, where necessary, for the more serious accidents.

You may also be asked for emergency medical travel kits. These contain a variety of sterilised and sealed items, such as syringes and needles, which are normally used by a doctor or nurse. These items may

not be readily available if someone is travelling to a remote area. Your pharmacist can order them in. And for malaria tablets or information on vaccinations, refer the customer to your pharmacist.

Finally... with many people seeking the three S's on holiday, you may find the condom stand gets rather depleted over Summer!

Travel checklist

Small leakproof bottles that can be used to decant cleanser, toner and moisturiser.	
leakproof shampoo and conditioner	
travel iron	sunglasses
travel hairdryer	soap
travel plug	loo paper
battery shaver	cotton wool
sunpreps, after-sun and total sunblock	
earplugs and goggles for swimming	
photographic equipment	
hairspray (maximum size 500ml)	
deodorant (as above)	
tweezers	water sterilising tablets
passport	freshen up wipes
ticket	footspray
money etc	

First aid

travel sickness tablets
anti-diarrhoeal
laxative
indigestion remedy
insect repellent
bite/sting remedy
antiseptic cream
adhesive plasters
bandage (+ safety pin)
analgesics
antihistamine
decongestant
malaria tablets (see C&D Reference Book for areas where prophylaxis is required)
regular medicines
hangover remedy

Riding On The Crest Of A Wave

THE ~~NO. 1~~ OTC
TRAVEL SICKNESS REMEDY RANGE

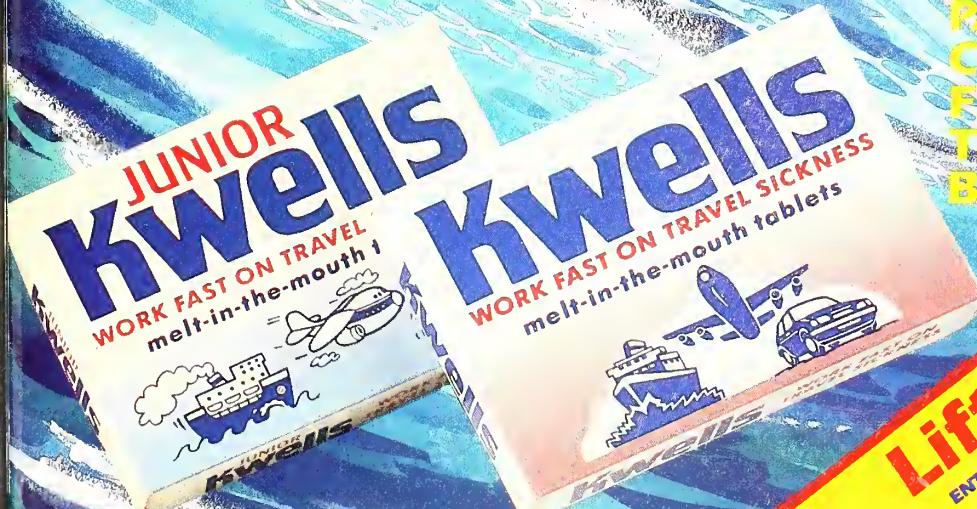


- MARKET LEADER WITH OVER 22% E SHARE*
- FAST ACTING, PLEASANT TASTING, MELT-IN-THE-MOUTH FORMULATION

*DATA ON FILE

- MAY BE TAKEN UP TO 30 MINUTES BEFORE THE JOURNEY OR AT THE FIRST SIGNS OF SYMPTOMS

- HANDY 12 TABLET PACK THAT CONVENIENTLY FITS INTO A TRAVEL BAG



Lift off with Kwells

ENTER THE KWELLS CHEMIST AND CHEMIST ASSISTANTS COMPETITION AND WIN A TRIP TO FLORIDA AND THE BAHAMAS FOR 2 PEOPLE, OR 50 RUNNERS UP PRIZES FROM YOUR COOLBOX - DETAILS IN THE COMPETITION COUPON.

NICHOLAS REPRESENTATIVE.

Travel sickness

The characteristic symptoms of travel sickness include giddiness, nausea, sweating, cold, disturbed vision, pallor and difficulty in walking. Output of saliva increases and this is followed by waves of nausea and vomiting which continue even though the stomach may be empty.

Motion sickness is caused when the signals the brain receives from the eyes and the balance organs in the ears become detached. People who choose to read in a car may become car sick — while their eyes are fixed on the page their ears are telling them they are moving in all sorts of directions. Children sitting in the back of a car who cannot see out of the window get a fixed message from their eyes, but a moving one from their ears; booster seats can be a great advantage.

It is generally recommended that passengers in cars avoid reading, ensure adequate ventilation and focus on distant objects on the horizon if prone to motion sickness. A headrest can help too. On ships in other than flat calms, sufferers should travel as close to the centre of the vessel as possible, avoiding the extremes of movement at bow or stern. Frequent snacks are probably better than no food at all if you can manage it.

OTC travel sickness remedies fall into two basic categories: those

based on hyoscine and the antihistamines. Hyoscine remedies have a rapid onset of action and should be taken around half an hour before departure. The most common side-effects are drowsiness and dry mouth. However, they should be used with caution in the elderly, and in people with urinary problems or high blood pressure.

The antihistamines, including cinnarizine, dimenhydrinate and promethazine are widely used too. They are generally long acting — promethazine theoate can give protection for up to 24 hours — but most do have drowsiness as a common side-effect and therefore are best avoided by drivers. They should generally be taken a couple of hours before setting off to get the best effect (see individual packs for details).

Pharmacy assistants should remember to ask carefully who and what medicines are for and if the patient is on any other treatment. Remember that there are other causes of nausea and vomiting, for example early pregnancy or injudicious excess of alcohol, that may be coincidental to a period of motion sickness. If you have any doubts, ask your pharmacist.

Unless stated, the following treatments are preventive, and should be taken at a specified time before a journey starts.

Avomine (P)

Fisons

White, scored tablets each containing promethazine theoate 25mg

Travel sickness

Prevention: One tablet the night before a long journey, or two hours before a short journey **Treatment:** Adults: One tablet as soon as possible, then one tablet each evening for two days **Children aged 5-10:** Half the adult dose

Caution: May cause drowsiness. Not to be taken during pregnancy. If taking other medicines, consult your doctor before taking
10 £1.29

(P) denotes that a product is **Pharmacy only** and can only be supplied under the supervision of a pharmacist.

Dramamine (P)

Searle

White, scored tablets containing dimenhydrinate 50mg

Travel sickness

Children 1 to 6 years: Quarter to half tablet
7-12: Half to one tablet **13 and over:** One to two tablets. All two to three times daily. Take first dose 30 minutes before journey.

Caution: Consult doctor if pregnant. Drowsiness warning
10 £1.12

Joyrides (P)

Stafford Miller

Pink, raspberry-flavoured, chewable, scored tablets each containing hyoscine hydrobromide 0.15mg

Travel sickness

Adults and children over 13: Two tablets
Children 7-12: One to two tablets **4-7:** One tablet **3-4:** Half a tablet
Caution: Drowsiness warning
12s £1.25

Kwells (P)

Nicholas

Pinkish tablets scored on one side, each containing hyoscine hydrobromide 300mcg

Prevention of travel sickness

Adults: One tablet every 6 hours, to a maximum of three in 24 hours **Children aged 4-10:** Half a tablet every 6 hours, to a maximum of one-and-a-half in 24 hours

Caution: Not to be taken if suffering from glaucoma. May cause drowsiness. Avoid alcohol
12 £1.18

Kwells Junior (P)

White tablets, scored on one side, each containing hyoscine hydrobromide 150mcg

Age 3-7: Half to one tablet every 6 hours, to a maximum of one-and-a-half to three in 24 hours **7-12:** One to two tablets every 6 hours, to a maximum of three to six in 24 hours
12 £1.18

Remember

Many of these products **can cause drowsiness**. Patients must be warned that their ability to drive, or operate machinery, may be affected. Alcohol should be avoided.

Patients should be advised to follow the directions on the pack and not to exceed the stated dose.

Pregnant women should not use these products without a doctor's advice. Ask your pharmacist.

Patients taking any other medication should be referred to your pharmacist.

Marzine RF (P)

Wellcome

White, scored tablets each containing cinnarizine 15mg

Travel sickness

Adults and children over 12: Two tablets 2 hours before a journey, followed by one every 8 hours if necessary **Children aged 5-12:** One tablet 2 hours before, followed by half a tablet every 8 hours

Caution: Drowsiness warning. Consult your doctor if you are pregnant or taking any other medicine
10 £0.98

Sea-legs (P)

Evans

White tablets, scored on one side, each containing meclozine 12.5mg

Prevention & treatment of motion sickness

Stugeron (P)

Chew or swallow the previous night or one hour before a journey.

Adults and children over 12: Two tablets
Children aged 6-12: One tablet **2-6:** Half a tablet.

Caution: Do not take during pregnancy. Drowsiness warning
12 £1.15

Oral hygiene

In this section, we list products for a variety of oral conditions including mouth ulcers, halitosis (bad breath), infections such as thrush and gingivitis, and topical treatments for toothache which can help until the advice of a dentist can be given. See individual entries for details.

We have also included products that can be used to help prevent the development of such conditions, for example before and after dental surgery, or to maintain oral hygiene.

Products therefore contain either an antiseptic, antibacterial or antifungal or combinations of these. Some products also contain an anaesthetic like benzocaine or lignocaine. Patients should be advised not to exceed the maximum stated dose of these products.

Fluoride products will be featured later in the year.

Aezodent (P)

Associated Dental

A pinkish-brown ointment containing chlorbutol 2.5%, methyl salicylate 0.9%, benzocaine 4.6%, menthol 0.5% and eugenol 0.5%

Pain and discomfort caused by dentures

Apply to surface or gums and to areas on denture where sore spots have developed

7g £1.21, 28g £2.42

Anaflex Lozenges (P)

Geistlich

White, citrus-flavoured lozenges each containing polyoxyxin 30mg

Mouth and throat infections such as tonsilitis, oral thrush and mouth ulcers Six to ten lozenges per day. Most infections respond in two to three days. Thrush may take four to six weeks

50 £3.30

Anbesol

(P)

Whitehall*Clear liquid containing lignocaine 0.9%, chlorocresol 0.1%, cetylpyridinium chloride 0.02%*

Mouth ulcers, dental irritation, sore gums

Wet finger tip and spread gently on to sore area of gum. Do not repeat for at least half an hour

Bottle 6ml £1.15 15ml £2.29

Prices in this section are correct at the time of going to press. For latest packs and prices, see C&D Price Service.

Betadine Gargle/Mouthwash

(P)

Napp*Amber solution containing povidone iodine 1%*

Infected, inflammatory conditions of the mouth and pharynx, and after dental surgery

Use undiluted or diluted with an equal volume of water warm. Gargle or rinse for at least 30 seconds. Repeat every two to four hours for as long as required.

Caution: Discontinue treatment if local irritation or sensitivity occurs

250ml £1.41

Bocasan

(P)

Oral B*White, granular, mint-flavoured powder containing sodium perborate monohydrate 68.635% and sodium hydrogen tartrate (anhydrous) 29.415% in each 1.7g sachet*

Cleansing the gingival tissue of the mouth, aid to treatment of gingivitis One sachet dissolved in 30ml water warm, to rinse the mouth three times a day after meals

Caution: Not to be used for longer than seven days without consulting doctor or dentist. Not to be used in children under 5, and supervise use in children up to 12. Contra-indicated in patients with severe renal disease. Do not swallow

20 £1.87

Bonjela

(P)

Reckitt & Colman*Clear, almost colourless gel containing choline salicylate 8.7%, cetylpyridinium chloride 0.01%*

Mouth ulcers and denture discomfort Using a washed finger apply to tender areas of buccal mucosa. Allow a minimum of three hours between applications

Caution: Not for infants under four months

15g £1.59

Bradosol

(P)

Ciba*White, circular lozenges each containing domiphen bromide 0.5mg*

Sore throats, minor throat infections Suck one every 2-3 hours, to a maximum of eight in 24 hours. If symptoms persist beyond 4-5 days, consult your doctor
24 £1.05

Bradosol Plus (P)
Pink, circular lozenges each containing domiphen bromide 0.5mg and lignocaine 5mg
24 £1.37

Corsodyl Mouthwash (P)
ICI

Clear, pink solution containing chlorhexidine gluconate 0.2%, available in original (aniseed) or mint flavours
Treatment and prevention of gingivitis, maintenance or oral hygiene
Rinse with 10ml for one minute, twice a day for one month
Caution: May discolor the tongue and teeth
300ml £2.15

Corsodyl Gel (P)
Clear, colourless gel containing chlorhexidine gluconate 1%
Brush teeth with one inch of gel on brush for one minute, twice a day
50g £1.43

Daktarin Oral Gel (P)

Janssen
Clear, sugar free pleasant orange flavour gel containing miconazole 2%
Mouth and throat infections
Apply a small amount of gel directly to affected area
Children 0-6 years: Twice daily after food.
Adults and children over 6: Four times a day. Retain gel in contact with affected area as long as possible. Continue treatment for up to 2 days after symptoms have cleared
Caution: Consult doctor if symptoms persist or if pregnant
15g £2.39

Dettol Mouthwash

Reckitt & Colman

Pink-tinted, clear liquid, with a peppermint aroma, containing chloroxylenol 1.02%
Mouth and throat infections, daily prophylactic mouthwash
Infections: 5ml in 200ml water, used as a gargle night and morning **Mouthwash:** 2.5ml in 200ml water, used once daily as a gargle
100ml £1.05

Difflam Oral Rinse (P)

3M Health Care

Clear, green solution containing benzodiamine 0.15%
Painful, inflammatory conditions of the mouth and throat
Rinse or gargle with 15ml, every 1.5-3 hours as required, and expel solution from mouth. Not suitable for children under 12
Caution: Uninterrupted treatment should not exceed seven days except under medical supervision
200ml £4.66

Difflam Spray (P)
Clear, colourless solution, ingredient as above

Use every 1.5-3 hours as required.

Adults: 4-8 puffs **Children 6-12:** 4 puffs
Under 6: 1 puff per 4kg body weight up to a maximum of 4 puffs
30ml £5.57

Dorant**LAB**

Red liquid containing 50mg of p-hydroxy benzoic acid esters in each 100ml
Cleansing and refreshing the mouth after meals
Dilute to taste or use concentrated to rinse the mouth
200ml £1.21

Eftab**Thornton & Ross**

Pink tablets each containing peppermint oil 0.0019ml, clove oil 0.009ml, spearmint oil 0.00028ml, menthol 1.87mg, thymol 0.7mg and methyl salicylate 0.00006ml
Oral hygiene
Dissolve one tablet in 300ml warm water and rinse for 2-3 minutes
25s £0.38

Eludril Mouthwash**Pierre Fabre**

Clear, red solution containing chlorhexidine digluconate 0.1% and chlorbutol 0.5%
Infections of the mouth and throat, oral hygiene
10-15ml diluted 1 in 3 or 1 in 4 with water. Wash the mouth or gargle two to three times a day
Caution: Not suitable for infants. Do not use if sensitive to either ingredient
90ml £1.10, 250ml £2.40, 500ml £4.51

Eludril Spray (P)
Clear solution containing chlorhexidine digluconate 0.05% and amethocaine 0.015%
Use three or four times a day, or in acute conditions use hourly
55ml £2.35

Frador**Pava**

Red liquid containing menthol 0.1%, chlorbutol 1%, prep. storax 2.9%, alcohol soluble matter of benzoin 15%, vehicle to 100%

Mouth ulcers and sores

Apply four times a day after meals and before going to bed.

Dip applicator in tincture, tilt head, apply and keep mouth open for 30

Caution: Consult doctor for ulcerated fauces or throat. Avoid spilling, especially on polished surfaces or fabrics
3.5ml £1.29

Labosept

(P)

LAB

Blackcurrant flavoured, red pastilles each containing dequalinium chloride 250mcg
Bacterial and fungal infections of the mouth and throat
Suck one slowly, between the gum and cheek, every three or four hours
Caution: Maximum of eight per day
20s £1.00

Listerine**Warner Lambert**

Clear amber solution containing ethanol, benzoic acid, eucalyptol, menthol, methyl salicylate and thymol
General oral hygiene, halitosis, anti-plaque
Slosh vigorously with one capful then gargle for 30 seconds, night and morning
Caution: Do not swallow
200ml £1.35, 400ml £2.25, 600ml £2.85

Listermint**Warner Lambert**

Clear, bright green liquid containing cetylpyridinium chloride 0.1% and zinc chloride 0.05%
Oral antiseptic, mouthwash and breath freshener, anti-plaque
Rinse with half a capful every morning and evening
Caution: Do not swallow
300ml £1.09, 600ml £1.69

Listermint with fluoride

Clear, bright green liquid containing sodium fluoride 0.05%
300ml £1.09, 600ml £1.69

Macleans Mouth Guard**Smith Kline Beecham***Aquamarine-colour liquid containing***Remember**

Some mouthwashes must be diluted before use and others are used undiluted. Follow the instructions carefully. Mouthwashes should not be swallowed.

Most liquids and gels for mouth ulcers must not be used for teething pains in infants. Check packs for details.

Advise patients to use a clean finger or swab to apply topical treatment for mouth ulcers.

Pastilles or lozenges containing anaesthetics should be allowed to dissolve slowly in the mouth, between the gum and the affected area.

Try to remember the flavours of the mouthwashes you stock; your customers are bound to want to know.

Oral hygiene product continued

cetylpyridinium chloride and sodium fluoride 0.05%

Oral hygiene

Use twice a day after brushing the teeth, or as pre-brushing mouthwash 300ml £1.85 600ml £2.89

Medijel Gel

DDD

Gel containing lignocaine 0.66% and aminocrine 0.05%

Mouth ulcers

Apply with finger tip, and repeat if necessary every 20 minutes 12.5g £1.12

Medijel Pastilles

Pastilles each containing lignocaine 0.25% and aminocrine 0.25%

Apply directly against mouth ulcer and allow to dissolve 25 £1.22

Medilave

Farillon

Gel containing benzocaine 1% and cetylpyridinium chloride 0.01%

Mouth and abrasions, infant teething

Adults: Apply gently, three or four times a day

Caution: Not recommended for children under 6 months 10g £1.05

Merocaine

Merrell Dow

Lime/lemon-flavoured, translucent green, circular lozenges with a raised edge each containing benzocaine 10mg and cetylpyridinium chloride 1.4mg

Pain relief in sore throat due to tonsilitis and superficial mouth infections

Adults and children over 12: One to be dissolved slowly in the mouth every 2 hours, to a maximum of eight in 24 hours

Caution: If symptoms persist, are severe or are accompanied by fever, headache, nausea or vomiting, consult your doctor 24 £1.37

Merocets

Merrell Dow

Yellow, translucent, peppermint-flavoured, circular lozenges, each containing cetylpyridinium chloride 1.46mg

Sore throat due to colds, aid to treatment of other infections and inflammations of the mouth and throat

Adults and children over 3: One to be dissolved slowly in the mouth every 3 hours, or as often as required 24 £1.24

Merothol

Merrell Dow

White circular, opaque menthol and eucalyptus-flavoured lozenges each containing cetylpyridinium chloride

1.4mg, menthol 6mg and eucalyptus oil 5mg

Sore throat and blocked nose, aid in the treatment of other infections and inflammations of the mouth and throat

Adults and children over 3: One lozenge every 3 hours or as required 24 £1.26

Mulcets

3M Health Care

Pale orange tablets each containing ascorbic acid 25mg and cetylpyridinium chloride 1mg

Soothe and aid healing of mouth ulcers

Adults: One to be dissolved slowly on the painful area. Repeat every 2-3 hours **Children under 7:** Maximum of four a day 20 £1.25

Oralcer

Vitabiotics

Green pellets containing cloquinol 3.5mg and vitamin C 6mg

Oral and denture ulceration

First day: 6-8 pellets per day, dissolved slowly near the affected area at half or one hour intervals. Second day onwards: 4-6 pellets, at one to two hour intervals

Caution: Do not swallow. After using continuously for one week, allow 30 days to elapse 20 £1.20

Oraldene

Warner Lambert

Clear, red solution containing hexidine 0.1%

Mouth infections such as gingivitis and periodontitis, dental ulcers, halitosis, pre- and post-dental surgery, oral thrush

Rinse or gargle with at least 15ml or Oraldene two or three times a day

Caution: Do not swallow 100ml £1.29, 200ml £2.05

Pickles Mouth Treatment

Pickles

Light tan coloured ointment containing tannic acid 2% and iodofrom 0.05%

Mouth ulcers, sore gums and split lips

Apply to tender area twice a day and at night if required 10g £1.20

Pickles Toothache Tincture

Pickles

Pale straw coloured liquid with clove-like taste and odour containing clove oil 10% and lignocaine 0.7%

Toothache

Place a few drops on cotton wool and apply to tooth and surrounding area

Caution: Flammable. Consult dentist if pain persists 10ml £1.10

Plax

Uniclinne

Red liquid containing sodium benzoate 2%, Polysorbate 20 0.84% and sodium

1.4mg, menthol 6mg and eucalyptus oil 5mg

Sore throat and blocked nose, aid in the

treatment of other infections and

inflammations of the mouth and throat

Adults and children over 3: One lozenge every 3 hours or as required 24 £1.26



My doctor has prescribed an antihistamine for my hayfever. How does it work?

Histamine is a substance we have in our body. It is released during an allergic reaction. In the case of hayfever it causes symptoms such as runny nose and itching, red and swollen eyes. Anti-histamines stop the reaction by "blocking" the areas in the body where histamine acts. However, as a side effect, some antihistamines can make you drowsy. Ask your pharmacist if this will cause a problem for you?

My 17-year-old son is complaining that his face gets sore and red after shaving — he uses a disposable razor. Would an aftershave help?

Your son should first make sure that any cuts or nicks from shaving are not becoming infected and that he changes his razor regularly or uses one specially for sensitive skin. If his skin is really sore, it is best to avoid aftershaves, as the perfume could aggravate the problem. Ask your pharmacist to recommend one of the new male skin care creams and aftershave balms, which should help soothe your son's skin.

? The National Pharmaceutical Association's syndicated "Ask your pharmacist" column, featured on several pages of this issue of

Over the Counter appears in dozens of local newspapers on a regular basis. C&D will pay £25 to any assistant who suggests a poser that the NPA chooses to answer through the media. Questions please to the Editor marked "NPA Q&A". *Over the Counter, Chemist & Druggist*, Benn House, Sovereign Way, Tonbridge, Kent TN9 1RW. Remember to include the address of your pharmacy.

lauryl sulphate 0.25%

Pre-brushing dental rinse

Rinse a tablespoon of undiluted liquid around the mouth for 30 seconds before brushing the teeth, twice a day 250ml £2.10 500ml £2.90

mouth about every two hours

Caution: Sensitivity warning

22 £1.25

Soothake

Pickles

Clear, pale tan, coloured gel containing benzocaine 7.5% and clove oil 4%

Toothache and denture irritation

Toothache: Apply a small amount of gel to cavity and gum surrounding it

Dentures: Apply to affected area

Caution: Apply sparingly. For temporary relief only, do not use continuously. Consult dentist as soon as possible.

5g £1.30

TCP Liquid Antiseptic

Uniclinne

Aqueous solution of phenol 0.175%, halogenated phenols 0.68% and sodium salicylate 0.052%

For mouth ulcers: Dab on undiluted

For bad breath: Dilute one part with five parts of water, and gargle after meals 50ml £0.89, 100ml £1.32, 200ml £1.83, 500ml £3.90

Rinstead Gel

Schering-Plough

Gel containing benzocaine 2% and chloroxylenol 0.1%

Mouth ulcers, and other causes of mouth soreness

Apply with a clean finger or swab, up to six times a day

Caution: If sensitivity develops or symptoms persist, consult your doctor. Do not exceed the stated dose. Not for use in infants or small children 10g £1.25

Teejel

Napp

Gel containing choline salicylate 8.7% and cetylalkonium chloride 0.01%

For relief of pain in mouth ulcers, teething pain, denture irritation and cold sores

Apply three or four hourly

Caution: Not for infants under 4 months Tube 10g £0.99

Tyrozets

Merck Sharp & Dohme

Pink, aniseed-flavoured lozenges each

containing tyrothricin 1mg and benzocaine 5mg
Minor mouth and throat irritations, secondary irritation following tonsillectomy and other mouth and throat surgery
One lozenge dissolved slowly in the mouth every 3 hours, to a maximum of eight in 24 hours
24s £1.22

Ulc-aid Mouth Ulcer Gel

Cupal

Colourless, buttermint-flavoured gel containing lignocaine hydrochloride 0.5%, ethyl alcohol (90%) 30% and cetylpyridinium chloride 0.025%
Mouth ulcers
Apply sparingly with a clean finger or swab. Repeat after 20 minutes, and then every 3 hours
Caution: Not suitable for teething troubles in babies
15g £1.15

Ulc-aid Tablets

Light green, aniseed-flavoured tablets each containing tyrothricin 0.5mg.

(P) denotes that a product is **Pharmacy only** and can only be supplied under the supervision of a pharmacist.

benzocaine 5mg and cetylpyridinium chloride 2.5mg
Sore throat, minor mouth infections and ulcers
One tablet dissolved slowly in the mouth every 2 hours, to a maximum of 7 per day or 15 in three days
20 £1.15

Vicks Chloraseptic Spray (P)

Proctor & Gamble

Green liquid containing phenol and sodium phenolate to a total phenol content of 1.4%
Pain from sore throat (pharyngitis), tonsilitis and superficial mucosal ulcers
Adults: Spray the back of throat five times, gargle thoroughly and expel solution. Repeat every two hours as needed
Children aged 6-12: Spray three times
Caution: Consult your doctor if sore throat is severe, lasts more than two days, is accompanied by high fever, headache, nausea or vomiting, and for children under six years
100ml £2.89

Vicks Chloraseptic Mouthwash (P)

Use full strength or dilute with an equal amount of water.
Rinse thoroughly and expel solution.
Repeat every two hours as needed
150ml £3.09

Cystitis

Cystitis is an inflammation of the bladder which, it is estimated, affects two million women in the UK every year. The common symptoms are a stinging, burning pain on passing urine, coupled with an urgent need to pass water however little there is to pass.

About half of all cases are due to a bacterial infection. There are a number of causes, including poor personal hygiene, sensitivity to perfumed products, reactions to certain foods. Close fitting tights or synthetic underwear can add to the problem by creating a moist, warm atmosphere in which bacteria thrive. Recurrent cystitis can be linked to sexual intercourse.

Sufferers should be advised to increase fluid intake to help flush out the infection; half a pint every 20 minutes is a good yardstick. The OTC medicines available are all variations on the traditional potassium citrate mixture which neutralises the acidity of the urine so reducing the stinging pain. The need to increase fluid intake remains, and the complete course should be taken.

Patients should be advised to see their doctor if the symptoms are not cleared or if they recur after one course of treatment has been taken. Antibiotics may be required. Children, men and pregnant women should be treated by a doctor. If women complain of any other symptoms other than the simple ones explained above, they should be referred to your pharmacist. Cloudy or bloody urine, groin or stomach pains, or heavy discharges may indicate more serious conditions.

Aci-jel

Cilag

Buffered (pH4) gel base containing glacial acetic acid 0.92%
Non-specific chronic vaginitis where encouragement of vaginal acidity is considered appropriate
Insert one applicatorful as deep as possible into the vagina each morning and evening for two weeks or as directed
Caution: Consult your doctor if the condition is aggravated or does not improve. Discard remainder on completion of treatment
85g £5.81

Betadine Vaginal Pessaries (P)

Napp

Golden brown pessaries each containing povidone iodine 200mg
Vaginitis
Use throughout the menstrual cycle for two to four weeks. One pessary inserted night and morning using applicator
Caution: Stop using if irritation, redness or swelling develops. Do not use in patients with a history of iodine sensitivity. Not recommended during pregnancy or lactation. Product is spermicidal so do not use if conception is required

Remember

Most products for cystitis consist of a course of treatment. Patients should be advised to complete the course even if symptoms disappear.

Patients with cystitis should be advised to increase their fluid intake to help flush out the infection, and to pass water as often as necessary. OTC treatments are for women only. Refer the patient to your pharmacist if they are a man, child, or pregnant woman.

Refer any patients returning for a further course of treatment to your pharmacist. They should probably see a doctor.

Always ask if the patient is taking any other medication. Those with heart disease, high blood pressure, diabetes or kidney disease should be referred to your pharmacist.

28 £8.81

Betadine VC Kit

Concentrate containing povidone iodine 10% in a plastic applicator bottle
Once daily, in the morning, 14 days including during period. Dilute before use
250ml £2.78

Cymalon

Sterling Health

Granules containing sodium citrate 4g, in 7g sachets
Cystitis
One sachet in water three times a day for 48 hours, to complete the course
Caution: If symptoms persist after 48 hours, consult your doctor. Do not take without consulting your doctor if you are pregnant, have heart disease, high blood pressure, diabetes or any kidney disease
6s £2.59

One sachet dissolved in water three times a day over 48 hours. All six must be taken to complete the course

Caution: Consult your doctor first if you have had kidney disease, and during pregnancy. Not recommended for children under six.
6 £2.49

Dermidex

(P)

International

Cream containing lidocaine 1.2%, aluminium chlorhydroxyalantoinate 0.25%, chlorbutanol 1% and cetrimide 0.5%
Vulval or anal irritation
Apply every two hours
Caution: If symptoms persist after 48 hours, consult your doctor
Not suitable under one year of age
30g £1.83, 50g £2.75
6s £2.59

Effercitrate

(P)

Typharm

Effervescent tablets each containing citric acid 1.14g and potassium bicarbonate 1.39g
Cystitis
Two tablets in water up to three times a day after meals (Refer queries about children's dosages to your pharmacist)
Caution: Not to be used by patients with intestinal ulceration or impaired kidney function
12 £2.45

Lanacane

(P)

Combe

Pearlised smooth cream, containing benzocaine 3%, resorcinol 2% and chlorothymol 0.032%
Relief of itching, including rectal and vaginal itching
Adults: Apply directly to affected area three or four times daily as needed
30g £2.09 60g £3.39

Vagisil

Combe

Fine white powder, 100 per cent talc free
Absorbs excess moisture, reduces chaffing, promotes day long freshness
Apply freely as required
100g £3.09

OTC PRODUCT LISTING

Period pain and PMT

The products in the following short list are those specifically indicated for period pain or the symptoms of pre-menstrual tension. They contain ingredients found in other non-specific OTC pain killers or health supplements.

Many of the products for general pain featured in next month's OTC listing are also appropriate for period pain. See packs for details.

Aquaban

Thompson Medical

Bright blue, circular tablets each containing ammonium chloride 325mg and anhydrous caffeine 100mg

Diuretic for excess pre-menstrual water

Two tablets three times a day after meals, starting four to five days before expected menstrual period.

Discontinue at onset of period

Caution: Do not take for more than five days in any one month. Consult your doctor if there are signs of abdominal pain, nausea or headache, or if taking continual prescribed medication

30 £1.89

Benadon

Roche

White tablets each containing pyridoxine 20mg or 50mg

B6 deficiency conditions, symptomatic relief of premenstrual discomfort, especially irritability and tension

20-50mg daily

20mg 100 £2.42, 50mg 30s £1.59, 90s

£4.35

Codural

(P)

3M Health Care

Pink tablets each containing paracetamol 250mg, caffeine 50mg and homatropine methylbromide 0.75mg

Period pain

Two tablets three or four times a day, at intervals not less than 4 hours. Not recommended under age 12

Caution: Do not exceed the stated dose. An excessive intake of coffee or tea with these tablets may make you tense and irritable

20 £1.35

Complement Continus

(P)

Napp

Biconvex, yellow tablets each containing 100mg Vitamin B6 (pyridoxine hydrochloride) in patented continuos controlled release system

Pyridoxine (Vitamin B6) deficiency

One tablet taken daily or as directed

28 £2.66

Efamol PMP

Britannia Health

Soft gelatin capsules containing evening primrose oil 500mg, plus tablets of Efavite each containing vitamin C 125mg, vitamin B6 21mg, niacin 7.5mg and zinc 1mg

Dietary supplement for premenstrual use

Two capsules of Efamol and one tablet of Efavite twice a day, for ten days before menstruation

40 caps + 20 tabs £5.45

EP Tablets

(P)

Pharmax

White tablets each containing paracetamol 300mg, caffeine 50mg and codeine phosphate 8mg

Period pain

Two tablets at the onset of discomfort,

and repeat every 4 hours when necessary. Maximum of eight in 24 hours

16 £1.11

Femafen

(P)

Nicholas

Opaque pink and white sustained-released capsules each containing ibuprofen 300mg

Period pain and backache

Two capsules every 12 hours. Do not exceed four in 24 hours

Caution: Not to be taken by patients with stomach ulcers, asthmatics, those sensitive to aspirin, and during pregnancy

12 £1.30

Feminax

(P)

Nicholas

White tablets each containing paracetamol 500mg, codeine phosphate 8mg, caffeine 50mg and hyoscine hydrobromide 100mcg

Period pain

Two tablets every 4 hours, to a maximum of six in 24 hours

Caution: Not to be taken if suffering from glaucoma, or during pregnancy. Avoid alcohol

20 £1.46

Spasmonal

(P)

Norgine

Blue/grey, opaque, hard gelatin capsules each containing alverine citrate 60mg

Cramps associated with menstruation

One or two capsules one to three times a day. Not recommended for children

100 £18.03

Woman Kind

Windsor

Tablets each containing pyridoxine

25mg
Two a day
100 £2.99

Health supplements for women

There are also a number of health supplements on the market combining vitamins and other ingredients in proportions said to be in line with female requirements.

Among these are:

Premence —28 (Vitabiotics), a multimineral/multivitamin combination, subtitled the "premenstrual capsule formula"

30 £4.95

Ladycare (Booker Nutritional Products) a range of evening primrose oil and vitamin supplements with particular products for different stages in a woman's life: Number One (menstrual cycle) tablets 30 £3.29; Number Two (menopausal) tablets 30 £3.89; Number Three (the over 50's) tablets 30 £3.59

Confiance (Wassen International), a multivitamin/multimineral combination for women through the menopause 30 £3.95, 90 £9.75 365 £31.00

Vitalert for women (Chemist Brokers), a multivitamin for women from the individually targeted range of vitamin supplements

30 £2.69

Remember

Some analgesics contain the stimulant caffeine. Patients should be advised not to exceed the stated dose, and to restrict their intake of tea and coffee.

These analgesics must not be taken by girls below the age of 12.

Vitamin B6 may decrease the symptoms of PMT, but patients should be advised that excessive amounts of any vitamin should be avoided.

**Day in, day out
more women prefer
Efamol to any other
evening primrose oil**



BRITANNIA HEALTH PRODUCTS LTD

Bone up on your Calcium

and win a Trendy Russian Military Watch in the £1,200 Calcia Test of Knowledge



Take the time to learn about the dangers of calcium deficiency and how Calcia can help balance your customers' calcium needs and you could win the fashion sensation of the year, an intriguing Russian military wrist watch. These watches feature a distinctive winder cover/frost protector and retail at around £80.

All you have to do is read the information below and then answer the questions in the coupon. There are 15 of these super timepieces to be won, so have a go!

BALANCED CALCIUM INTAKE TODAY MEANS A HEALTHIER YOU TOMORROW

As we grow from childhood, the role of calcium in our bodies changes from **building** bones to **maintaining** them. Every year, your body replaces 20% of its bone calcium and you simply cannot afford to fall behind in this natural process.

Why is calcium so important to women especially?

Women require more calcium throughout their lives than do their male counterparts. Unfair, but a fact of life. Pregnant, or breastfeeding women, for example, will need more than **double** the recommended daily amount of calcium.

Entry Form

Check the correct answers.

How much bone calcium does the body replace annually?

35% 20% 15%

In addition to calcium, Calcia supplies:

Zinc Cobalt Iron

How much above the recommended Daily Amount (RDA) of calcium do pregnant and breastfeeding mothers need?

Double the RDA Treble the RDA

Name _____

Position _____

Shop Address _____

Daytime Telephone No. _____

Send your completed entry to:
Calcia Competition, Over the Counter, 23-27 Tudor Street, London EC4Y 0HR, to arrive before June 29th, 1990 (remember to fill in your name and address). The prize winners will be the first 15 correct entries to be selected from the postbag on the closing date.

Rules

1. All entries must be made on a form cut from Over the Counter. All entries become the property of English Grains Healthcare.

2. The competition is not open to employees of English Grains Healthcare or Over the Counter, their families or the companies' agencies.

3. The closing date is June 29th, 1990. Entries arriving after this date will not be accepted.

4. All entries will be examined by the judges. The judges' decision is final and no correspondence will be entered into.

5. Winners' names will be available on request after the closing date of the competition.



At the age of around 35, we start to lose calcium faster than we can replace it - a process accelerated by hormonal changes during the menopause. So women around, or beyond, this age will probably need more calcium than before. By balancing calcium intake at an early age, bones are better prepared for these potentially damaging changes.

Calcia helps keep the balance

Recognising the problems associated with calcium deficiency facing women particularly, English Grains Healthcare formulated a dietary supplement called Calcia to ensure calcium intake keeps pace with the body's needs. In addition to calcium, Calcia supplies those other minerals and vitamins essential to a woman's health, including iron and vitamin D.

Calcia puts in what the diet leaves out

Modern dietary trends are making us healthier in many respects and yet, as we move away from calcium-rich foods like milk, cream and cheese, a valuable source of calcium is being lost. Women on crash diets, or merely slimming, should take particular care. Also, natural fibre such as bran products tend to bind to calcium, making it difficult for the body to use the calcium, making supplements more necessary than ever.

Calcia. Probably the best long-term investment a woman can make

Just three Calcia tablets a day provide your customer with sufficient calcium to supplement her diet, supplying both her immediate and her long-term needs.



May month for hair

Haircare takes a front seat this month, with a relaunch for All Clear and new products from Graphic, Corimist and VO5. The electrical goods manufacturers are not overshadowed either with Braun unveiling a new look Independent and a new Curly Style.



Babycare

Blow-up potties? What next?

The inflatable Pakka Potty, which folds up and fits into its own wallet is said to be ideal for travelling. It should be used in conjunction with a scented liner which can be disposed of after use.

Product Technology UK. Tel: 0633 838080
Potty £4.99 liners 25 £1.25

Sterilise bottles in bags!

Banish problems of what to do with bulky sterilisers and solutions when on the move. Disposable sterilising bags (DSBs) can be used to sterilise a variety of items such as beakers, cutlery, bowls, teethingers and even breast pumps, providing they have no metal parts, the company says. Boxes contain seven individually foil-wrapped polythene DSBs. Each has an integral sachet of two standard cold water sterilising tablets of 400mg sodium dichloroisocyanurate, producing a solution which remains effective for 24 hours. Bags are large enough to hold four complete 8oz bottle kits.

Lewcal. Tel: 0474 879033
7 £7.99

New look wipes from Robinson

Look again at Robinson baby wipes, they now come in a new size tub of 80, £1.69 and are lanolin and alcohol free. They smell good too, says the company, with a new soft fragrance. A trade promotion runs until May offering one free for every 12 on minimum orders of four outer boxes.

Robinson Healthcare. Tel: 0246 220022.

Yummy yoghurts

Heinz yoghurts have been increased to eight variants, with the addition of two new variants: five fruit and sunshine fruit. Suitable for babies aged 3-15 months, the jars are colour-coded with green labels.

Heinz. Tel: 081-573 7757

Beauty

Trial Cutex One Coat

From next month, your customers will have a chance to purchase special 7ml trial size bottles in the Cutex One Coat nail polish range. Six shades will have a special price of £0.99.

Parfums International. Tel: 071-486 2228

The Summer story

A new look for Summer can be created with Givenchy's range of bronzed cosmetics. The sun prism retails at £18 and is said to give a sun-kissed look to even the palest complexion. It can be complemented with a bronze lipstick at £7.95 and an eye shadow duo in bronze and terra at £12.50. Parfums Givenchy. Tel: 0932 245111

A glowing sales drive

Ultra Glow are concentrating on the pharmacy this month with a range of special offers aimed specifically at the independent chemist. An introductory range merchandiser and a shelf talker start off the promotions.

Ultra Glow. Tel: 071-607 9983

Fragrances



California's in the UK!

Imagine a top note of muguet, rose and geranium, a heart of sandalwood, vetyver and carnation, and a base of vanilla, oakmoss and amber... that's California. It's a fragrance which is said to embody the 90s woman, and is already a "best seller" in the US.

It is available in eau de toilette (30ml £12.50, 60ml £17.50), eau de parfum (17ml £14.50, 30ml £18.50), and parfum (15ml £28). An introductory offer of a 17ml EDT for £7.95 will be available when California is launched in July.

Max Factor. Tel: 0202 524141



Haircare

Gliss two for Summer

Schwarzkopf describe their new Gliss Corimist sunscreener as a lightweight, non-greasy spray which will protect the hair from the drying, damaging effect of the sun, sea and chlorine. It contains conditioners and UVA and UVB filters, can be used on wet and dry hair and reapplied after swimming. Also new to the range is a split ends formula care and sealing gel, which is said to temporarily seal split ends while moisturising and conditioning.

Schwarzkopf. Tel: 0296 88101
Sunscreener 150ml £3.50, split ends gel 150ml £2.95

More VO5

New VO5 sculpting gel spray, which gives hold without stickiness or build-up, can be used on damp or dry hair to give lift and volume, say Alberto Culver. It has a controlled drying formulation which will allow enough time for styling and creating specific looks. Curl booster gel spray revitalises curls on permed or naturally curly hair. Best results are achieved on towel-dry hair with liberal application to the roots.

Alberto Culver. Tel: 0256 572222
Both 200ml £2.19



Getting the All Clear

This month, All Clear shampoo will look different. New packs are "more bold and eye-catching". The size and shape of the bottles remains the same — outlined in white — with the rest of the pack in the variant colour: vivid blue for normal, green for frequent use, and purple for greasy. A red stripe flash across the top says "clears dandruff", the brand name is in black, and the variant name is larger.

Elida Gibbs. Tel: 071-486 1200



Going for curly locks

For those looking for a bit of curl in their lives, the Braun Curly Style LS33 could be the answer. An easy to use styler that creates curls and ringlets, it features an extra long hanging loop and an indicator dot to show when it is fully heated.

Braun (UK). Tel: 0932 785611
£6.95

An Independent new look

Braun are relaunching a restyled version of their Independent 2000 range of stylers. The new look Independent has white and grey livery with control buttons picked out in bright colours. An ad campaign worth £350,000 will support the range.

Braun (UK). Tel: 0932 785611

Sensational styler

Kent's new handbag styler is a half round brush said to be perfect for brushing and blow drying without scratching. It complements the existing Sensation range of six. A 10% discount is available to purchasers of six each of the seven-strong range.

G.B. Kent. Tel: 0442 232623
£3.95

Prices in this section are correct at the time of going to press. For latest packs and prices, see C&D Price Service.

More volume from Graphic

Garnier are going for volume sales with the latest products in their Graphic range. Volume spray comes in a non-aerosol pump action spray. It has been launched in response to the increasing consumer trend towards more natural styles with extra volume, the company says. Volu-mousse gives volume and body as well as a more unstructured look. It also includes UVA and UVB filters. Press support in the women's and youth Press totals £300,000, while the Great Graphic Roadshow will shortly be touring the country. Laboratories Garnier. Tel: 071-937 5454
Volume spray 150ml £1.99. Volu-mousse 200ml £2.29



Sanatogen's lost nerve name and gone original

Sanatogen nerve tonic powder has been relaunched and renamed original powder.

The new packaging is in the original Sanatogen style of red, yellow and black. Fisons say it is designed to appeal not only to loyal users, but also to expand the market with a clearer statement of purpose on the packaging.

An on-pack promotion for free television licence stamps is running on all three sizes of Sanatogen original powder.

Fisons Consumer Health. Tel: 0509 611001
125g £2.26, 250g £3.99, 500g £6.82

Feeling menopausal?

Gynovite Plus is a nutritional supplement containing 28 vitamin and minerals, formulated for menopausal women. The dose is two tablets daily.

Parkwood Health. Tel: 0892 395956
60 £9.95

Alpha or omega?

It's Pure Omega from Brithealth, fish oil capsules (500mg) which contain a 60 per cent concentration of free fatty acids. Additional features include enteric coating to help reduce the flatulence and belching which can result from taking fish oils.

Brithealth. Tel: 0763 244785
50 £12.99

Under attack?

First Defence is a Healthcrafts supplement containing vitamins and minerals to boost the body's immune system, according to Booker. It contains vitamin C, vitamin E, selenium, beta-carotene, zinc, iron and copper. Booker Nutritional Products. Tel: 0932 336366
60 £4.99

Calcia comes in blister packs

A blister-packed trial size of Calcia is now available from English Grains Healthcare. The pack contains 12 tablets and retails at £0.49. A ten page leaflet outlines the role of the calcium replacement and a counter display unit is available.

English Grains. Tel: 0283 221616

Seven Seas supplemented

Four products have been added to the Seven Seas supplements range, all containing only natural colouring, and free from added flavourings and preservatives. They are: pure salmon oil 500mg capsules (50 £4.99) — two per day; beta-carotene 15mg capsules (30 £5.49) — one daily; natural vitamin E 500iu in wheatgerm oil 100mg, 30 £3.99; and odourless one-a-day garlic perles (60 £3.49). A drop-feed unit, headed "Natural supplements from Seven Seas" will contain six tubs of each, as well as six super evening primrose oil, and six Korean ginseng.

Seven Seas. Tel: 0482 75234

OTC Medicines

Scholl give athlete's foot cream a face-lift

Scholl are relaunching their athlete's foot range with a new cream and a repackaging. The cream contains tolnaftate and replaces the gel formulation, £1.29. Blue and yellow corporate colours on a pale blue background give the range a new look and a foot graphic emphasises key product benefits. Promotional packs of the foot spray will offer 25ml extra free for the Summer, while stocks last.

Scholl (UK) Tel: 071 253 2030.

For all scalp conditions

- ✓ A lightly fragranced formula with the strength of coal tar.
- ✓ Does not stain the skin, clothes or bath.
- ✓ Leaves the hair shiny and easy to manage.

ALPHOSYL SHAMPOO

The effective scalp treatment in a cosmetic shampoo.



Actal and Panadeine new look

Look out for new style Actal and Panadeine packs. Both now feature the Sterling Health logo prominently on packs providing more dosage instructions and details of indications in an "easy to read" format with a quality varnish finish and updated brand logos. Actal packs are now predominantly white with a blue logo, with green stripes highlighting the mint flavour. Panadeine packs remain red and white. Counter units are available from Sterling Health representatives.

Sterling Health. Tel: 0483 65599

Personal Hygiene



Check it out!

Body Check antiperspirant has been relaunched, and a second variant added, both with "quality" fragrances and a double active ingredient for protection. The original, with aromatic chypre fragrance, has a red check, and new classic, with a light, refreshing fragrance, a yellow check. The aerosols are CFC-free, and the graphic of a male figure gives a "no-nonsense, healthy" image. SmithKline Beecham Personal Care. Tel: 081-560 5151 150ml around £1.09

Photographic

A flash party

A sound activated camera, which can be set at three different sound levels, is ideal for parties, say Konica. So they've called it...the Party, and are marketing it as a fun item to take candid shots. The camera flashes on and takes a photograph when the set sound level is reached.

Konica. Tel: 081-751 6121 £69.95



635 for happy snaps

The Kodak 635 camera is aimed at the general camera user. It boasts motordrive, fixed focus and built in flash and is so simple to load and use, say Kodak, that even the most inexperienced photographer should be able to get reliable and good quality pictures. Promotions this year include advertisements for the enthusiast film Ektar and, for general users, of Kodacolor Gold.

Kodak. Tel: 0442 61122

Skincare

Panthere's Body Beauty

The Cartier's Panthere fragrance range has been extended with a Body Beauty collection. The range comprises a cream, moisturising milk and dusting powder, all packaged in the Cartier livery and all of which are refillable. Also available is the Bijou sac, a miniature replica of the Panthere perfume bottle.

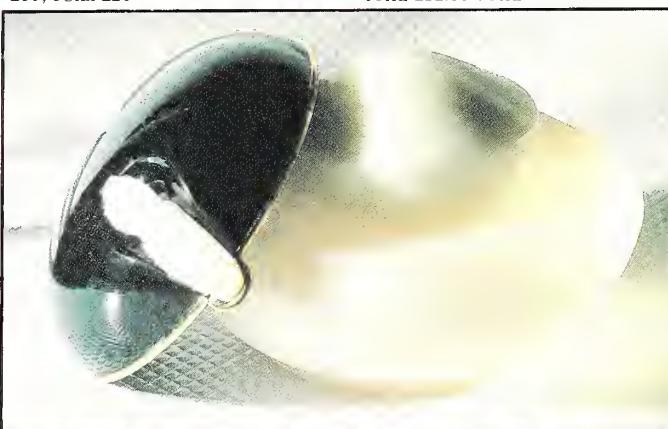
Cartier. Tel: 071-493 6962

Cream 200ml £65, refill £29, milk 200ml £53, refill £22, powder 100g £56, refill £26



Clinique in oil attack

Clinique are combating oily complexions with their latest moisturiser — the oil free moisture formula, said to be suitable for oily skin that needs moisturising without an excess of oil. It is fragrance free and allergy tested. Clinique Tel: 071-499 9305. 40ml £12.50 75ml £17.50



Sundries

Bags of luxury

The luxury collection of cosmetic bags from Addis is said to combine elegance and quality. Three collections make up the range — Satin, Velvet and Lace, and prices start at £4.99. Individually designed packaging is said to make the bags "ideal gift purchases". Addis. Tel: 0992 584221



Coordination from R&G

Redmayne and Graves are looking towards coordination with their latest range of bone china bathroom accessories. The china coordinates with their English Country Garden toiletry and cosmetic bags and comprises soap dish £3.95, toothbrush holder £3.50, cotton wool jar £12.50 and powder bowl £12.95, all providing a perfectly coordinated bathroom, they say.

Redmayne & Graves. Tel: 0768 63774

Packs of pot pourris

A new home fragrance range of pot pourris, comprising seven floral mixtures, with a reviver oil and spray room mist, has been launched by Taylor of London. They are: royal rose, morning freesia, spiced peach, highland glen, spring rosebud, cottage lavender and Christmas cheer. The natural oil is used to revive the fragrance when it begins to fade, and the mist room is a natural pump spray in a crystal clear glass bottle.

Taylor of London. Tel: 096 273 3202

Small £2.25, medium £3.95, large £4.95, 100g bags £4.25, oil £3.25, mist £3.65

For health conscious customersit's the NATURAL CHOICE

FROMENT

Toasted
Wheat Germ

BRAN

Natural and
Toasted

TOP QUALITY
PRODUCTS AT VERY
COMPETITIVE PRICES
Check your lists or
local wholesalers



John H. Heron Ltd., 145 Boothferry Road, Goole DN14 6AX. Tel: (0405) 764271

A crushing solution from Ibis

Ibis have come up with the perfect solution for people who find tablet swallowing difficult. Their tablet crusher £3-£4 is described as an easy to use powdering system in FDA approved materials. It comes with full-colour how-to-use illustrations. It is currently being shipped direct from the US. Ibis, PO Box 80287, Phoenix, Arizona 85060

Bodyplan goes bananas!

Banana and pineapple is the latest flavour to be added to the Bodyplan slimming range. Apparently it's the one consumers most desired! Reckitt & Colman. Tel: 0482 26151

Six sachets £5.29

Prices in this section are correct at the time of going to press. For latest packs and prices, see C&D Price Service.



C'est Nouvelle

"Green" toilet tissues Nouvelle, launched last April, have been relaunched with additional benefits. Most importantly, the packaging has been changed to a material said to be 50 per cent recycled — the best that can be done at present, according to manufacturers Fort Sterling, making it the first green film packaging.

At the same time the pack design has changed. Pastel shading and a country view combine with the burgundy Nouvelle logo and lozenge design from the original packs. The pastel shades match the changes to the product itself, which now comes in three soft colours — peach, pink and green, as well as natural white, which 40 per cent of consumers prefer.

Various support measures include a 10p-off coupon drop to one million homes nationwide, and in the Midlands only a television commercial which shows how Nouvelle "helps saves trees".

Fort Sterling. Tel: 0204 68611

Fast first aid from S&N

Smith & Nephew Medical's relaunched first aid kits are now offering refill packs for the first time. Elastoplast kits 1 to 6 now also contain Medi-Fresh alcohol-free wipes to comply with new provisions in the Health and Safety (First Aid) Regulations 1990. Refill packs for kits 1 to 3 only, will be available from next month. Smith & Nephew say that with many small businesses looking at how they should comply with the new legislation, pharmacies should be well placed to pick up sales. The company itself will be running awareness campaigns in the local press informing businesses of their obligations, pointing the way to the local pharmacy for supplies.

Smith & Nephew Medical. Tel: 0482 25181.

Scholl smooth tired feet

Hard, rough skin can be smoothed away with the pumice brush from Scholl. The brush is said to have an "easy to grip" design with tough bristles, perfect for removing rough skin or stains on elbows, feet or knees.

Scholl (UK) Tel: 071 253 2030.
£1.99

Brighter colours for Jordan

Jordan have given their interdental range a face lift with bright new graphics and more modern packaging. Starting next month, the dental sticks will come in ribbed packaging and the dental floss has been made stronger following consumer demand, they say. Distributors Alberto Culver. Tel: 0256 57222.

Toiletries

Two from Taylor

Taylor of London have launched English Flowers, a collection of bath products, and a classic collection for gentlemen. The first range (prices £0.95-£12.95) comprises bath essence, bath seeds, toilet soap, toilet water in two sizes, talcum powder, and small and large perfumed sachets. It comes in china white packs decorated with inter-weaving of traditional flowers. The second range, (prices £0.95-£9.95), for "today's man", consists of after shave, cologne skin balm, soap, foaming bath seeds, drawer sachets and wardrobe sachet. Taylor of London. Tel: 0962 733202

Almay courses

For assistants in Almay agencies. Information and invitations from Cherie Wilson, Almay, 225 Bath Road, Slough, SL1 4AU. Tel: 0753 23971.

Ciba Consumer courses

Further information on Ciba's skin care regional training programme is available from Mike Dallman, Ciba Consumer Pharmaceuticals, APP House, 100 Station Road, Horsham, West Sussex RH13 5EU. Tel: 0403 59466.

Sterling Health courses

Further information on the 1990 programme of the Sterling Health Educare Roadshow is available from Les A'Boe, operational manager, Sterling Health, 1 Onslow Street, Guildford, Surrey GU1 4YS. Tel: 0483 65599.

Diary

Numark/Butler courses

Further details on these training sessions are available from Mike Callus, E.H. Butler & Son Ltd, 47 Morris Road, Leicester LE2 6BS. Tel: 0533 702881.

The following courses are for pharmacy assistants

June

4	Leeds	Skincare
5	Washington	Self-medication/Headache/Cystitis
6	Cambridge	Skincare and cosmetics
6	Leicester	Contact lens care
7	Northampton	To be announced
20	Liverpool	Skincare
21	Nottingham	Skincare

July

10	Leeds	Self-medication/Headache/Cystitis
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Numark/E.H. Butler/Countercall	Ciba
Numark/E.H. Butler	Sterling Health
	Almay
	Ciba

Sterling Health

Quiz

£125 to be won

The five readers submitting the first correct entries opened after the closing date will each win £25

1. What do wetting solutions do to contact lenses?

- a) Lubricate
- b) Remove deposits
- c) Keep them sterilised

2. The maximum daily dose of paracetamol for adults and children over 12 is:

- a) Ten tablets (5,000mg)
- b) Twelve tablets (6,000mg)
- c) Eight tablets (4,000mg)

3. Which of these antihistamines does not usually cause drowsiness as a side-effect?

- a) Terfenadine
- b) Chlorpheniramine
- c) Promethazine

4. Which babyfood company is offering three £11,000 kitchens in an on-pack promotion this year?

- a) Robinsons
- b) Milupa
- c) Cow & Gate

Breast milk is rich in which vitamins?

- a) A,D,E and K
- b) B1 and C
- c) B2,C and K

Name

Pharmacy

Address

6. The commonest side effect of ibuprofen is?

- a) Dry mouth
- b) Cramps
- c) Stomach irritation

7. Weaning usually begins with:

- a) Gluten-free baby rice
- b) Meat and two veg
- c) Boiled eggs

8. If a person with red hair and freckles asks for a sun cream, what protection factor would you suggest?

- a) 4
- b) 6
- c) 10 or above

9. How many children in the world suffer from an acute diarrhoeal disease in one year?

- a) 270 million
- b) 570 million
- c) 770 million

10. The new Lynx fragrance is called?

- a) Puma
- b) Java
- c) Hawaii

Mismatch

£125 to be won

The five readers submitting the first correct entries opened after the closing date will each win £25

In the following groups of OTC medicines one is the odd-one-out in each group. Can you pick out the mismatches in each case? Write the answers in the spaces provided, fill in your name and pharmacy address and send it off to the address below. Entrants must be assistants employed in a registered pharmacy for a minimum of 6 hours in a normal week. Only one entry is allowed from any one person. The names of the winners will appear in the next issue of *Over the Counter*.

A Carylderm, Clinicide, Derbac-C, Prioderm
B Benylin, Haymine, Pollon-eze, Triludan
C Brooklax, Calsallettes, Dioralyte, Senokot
D Acnidazil, Tinaderm, Triac, Valderma
E Migrafen, Nurofen, Panadol, Proflex
F Afrazine, Aludrox, Bisodol, Maalox

A D

B E

C F

Closing date for entries: Monday, June 11.

Send completed answers to Quiz No6, *Over the Counter, Chemist & Druggist*, Benn House, Sovereign Way, Tonbridge, Kent TN9 1RW.

Name

Pharmacy

Address

Correct answers to all ten questions in this month's Quiz can be found in the April, May and June issues of *Over the Counter*. Tick the boxes next to the answers you think are correct. Entrants must be assistants employed in a registered pharmacy for a minimum of 6 hours in a normal week. Only one entry is allowed from any one person. The answers and names of the winners will appear in the next issue of *Over the Counter*.

Closing date for entries: Monday, June 11.

Send completed answers to Quiz No6, *Over the Counter, Chemist & Druggist*, Benn House, Sovereign Way, Tonbridge, Kent TN9 1RW.

Buz Pel

Insect
Repellent Wipes

Instant protection for
holidays abroad and all
outdoor pursuits.

NATURAL
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[®] The effective and convenient deterrent
against biting and stinging insects

Moist lemon scented wipes containing natural pyrethrum to protect for up to 8 hours against midges, mosquitoes and other biting and stinging insects.

Attractively boxed in 10's for impulse purchase or recommendation.

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Broughton House, Earl Street, Maidstone,
Kent ME14 1PF

Telephone: 0622-762269

Telex: 965194 LEGAT G Fax: 0622-764046



BY VERITY

Verity is a real-life pharmacy assistant working full-time in a pharmacy somewhere in the UK, writing about her job as she sees it.



The early spell of hot weather most of us have been enjoying lately has certainly made us very busy selling sun creams and antihistamines. At one point we sold out of after-sun lotions completely. Have you ever noticed that most people only buy after-sun when the damage has already been done. Perhaps they all think they won't be the ones who get burnt. Those with very severe burns are possibly those who didn't bother with a sun-block cream either.

It also seems that many people who do use a sunscreen could well be choosing the wrong one. A large majority of people in one survey thought SPF4 was a high protection factor, so perhaps there are quite a few people who could benefit from our assistance when choosing a sun cream. If at the same time we could persuade them to buy an after-sun as well, they won't have to rush into a pharmacy at five minutes to closing time in a very painful state.

When the hot spell began, we did very well with "fake" or "instant" creams and lotions as people peeled off clothing revealing parts kept well hidden from public

view since the end of last Summer. Most people seem particularly conscious of their legs and thighs — one lady told me hers resembled lumps of lard prior to tanning! I'm sure they didn't, but I gave her some sample sachets we had and she promised to come back before her holiday for a full size pack.

I mentioned this group of products because they seem to have improved dramatically over the past few years, no longer giving bright orange streaks so you resemble next door's ginger cat, but a natural tan if carefully applied.

Film sales and D&P orders have also been boosted by the sunny spell. Last week I was showing a new Saturday girl how to accept films in and make out the docket. She watched me a few times then *vice-versa*.

As luck would have it, I was called off to the phone but as I went told our girl: "Don't worry it's all straightforward". Famous last words. She came to me, film in hand, saying: "Excuse me but the customer says that the film has been accidentally immersed in glue. What shall I do?" I don't think I'll ever say "straightforward" again when teaching someone about film processing.

MEANWHILE ...

by Andy



HAVE YOU GOT ANYTHING FOR TRAVEL SICKNESS?
YES SIR, WE HAVE A WIDE SELECTION...

WHAT IS YOUR PROBLEM?
— SEA TRAVEL : THE PITCH AND ROLL OF THE BOAT? OR IS IT AIR TRAVEL: THE GIDDINESS AND STOMACH-TURNING OF TAKE OFF? OR PERHAPS IT'S CARS? THE SMELL OF PETROL FUMES?



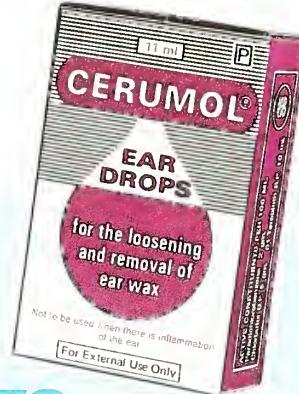
AND THAT CLAUSTROPHOBIC HEADACHE! SO WHICH WOULD IT BE? SIR?...



SIR?... SIR?
BLAUGH!
KISS ME

LAB PRODUCTS

**for efficacy
quality
and competitive
prices**



Not to be used if there is inflammation at the ear.

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